


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008 8:00 am
Secretary of State

03-03-2008 90202 037 ***150.00

DOCUMENT # H68753 1. Entity Name HERITAGE BANK OF NORTH FLORIDA					
Principal Place of Business 794 BLANDING BLVD. P O BOX 2107 ORANGE PARK, FL 32067-2107			Mailing Address 794 BLANDING BLVD. P O BOX 2107 ORANGE PARK, FL 32067-2107		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2559367	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			City		
FL			Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD HEAD, ROBERT J., JR. 841 SORRENTO ROAD JACKSONVILLE, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUNTLEY, WARD L 4568 ORTEGA BLVD JACKSONVILLE, FL 32210	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KNEPPER, RANDOLPH L P.O. BOX 2107 ORANGE PARK, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	REINEKE, LOIS 2199 ASTOR STREET, #103 ORANGE PARK, FL 32073	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORRIS, SHELDON A. 6975 OLD CHURCH ROAD GREEN COVE SPGS., FL	<input checked="" type="checkbox"/> Delete Retired		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Winfield A. Gartner <input type="checkbox"/> Change <input type="checkbox"/> Addition 1660 Prudential Dr. Ste.203 Jacksonville, FL 32207
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OAVP SCOTT, JUDITH A 2498 BOTTOMRIDGE RD ORANGE PARK, FL 32065	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Michael V. Kearney CFO</i>		02-27-08		904-272-2265	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

Michael V. Kearney, CFO

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ANNUAL REPORT

ATTACHMENT
40037088

Heritage Bank of North Florida
Document #H68753

(Physical Address)

794 Blanding Boulevard
Orange Park, FL 32065

(Mailing Address)

Post Office Box 2107
Orange Park, FL 32067

Director
Pass, Deborah S.
1028 Fruit Cove Road
Jacksonville, FL 32065

Director
Wilhite, Marvin E.
2050 Alpha Court
Orange Park, FL 32073

Officer – VP
Hall, Charlotte A.
4332 Rye Court
Jacksonville, FL 32259

Officer – SVP
Strickland, James R.
2718 Tanya Terrace
Jacksonville, FL 32223

Officer – AVP/Electronic Banking Officer
Marquez, Shirley O.
1631 Dartmouth Drive
Middleburg, FL 32068

Officer-SVP
Totten, Greg
4658 Empire Avenue
Jacksonville, FL 32207

Officer-SVP-CFO
Kearney, Michael V.
4644 West Seneca Drive
Jacksonville, FL 32259

Officer-VP
Ventura, Remi
5630 Coldstream Court
Jacksonville, FL 32222