

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H76426

1. Entity Name

PREMIER COMMUNITY BANK OF FLORIDA

FILED

Apr 10, 2001 8:00 am
Secretary of State

04-10-2001 90106 003 ***150.00

Principal Place of Business

Mailing Address

350 E. BAY DRIVE
P O BOX 2910
LARGO FL 33770
US

350 E. BAY DRIVE
P O BOX 2910
LARGO FL 33779-910
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2577296

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Valerie Kendall

Street Address (P.O. Box Number is Not Acceptable)

350 East Bay Drive

City

Largo

FL

Zip Code
33770

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.

SIGNATURE

Valerie Kendall

Valerie Kendall, Executive Vice President

3/27/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS AYERS, JAMES T.
CITY-ST-ZIP 350 E. BAY DRIVE
LARGO FL

TITLE ☐ Change ☒ Addition
NAME Pd
STREET ADDRESS Price W. Schwenck
CITY-ST-ZIP 350 East Bay Drive
Largo, FL 33770

TITLE ☐ Delete
NAME D
STREET ADDRESS FEASTER, GEORGE E.
CITY-ST-ZIP 350 E. BAY DRIVE
LARGO FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME PCD
STREET ADDRESS COUNTS, NORRIS E
CITY-ST-ZIP 350 E. BAY DRIVE
LARGO FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS HARRISON, STEANS I
CITY-ST-ZIP 350 E. BAY DRIVE
LARGO FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS PHILLIPOFF, J. VICTOR
CITY-ST-ZIP 350 E. BAY DRIVE
LARGO FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Price W. Schwenck

3/27/01

Date

Daytime Phone #

CR2E034 (10/00)