

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J91260

FILED  
Feb 11, 2009  
Secretary of State

Entity Name: FIRST STATE BANK

## Current Principal Place of Business:

22 SOUTH LINKS AVE.  
SARASOTA, FL 34236 US

## New Principal Place of Business:

## Current Mailing Address:

22 SOUTH LINKS AVE.  
SARASOTA, FL 34236 US

## New Mailing Address:

FEI Number: 65-0114339

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRENCH, C. T  
2033 MAIN ST., STE. 304  
SARASOTA, FL 34236 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WILKINSON, JED  
Address: 22 SOUTH LINKS AVE  
City-St-Zip: SARASOTA, FL 34236 US

Title: D ( ) Delete  
Name: THOMAS, WRIGHT  
Address: 22 SOUTH LINKS AVE  
City-St-Zip: SARASOTA, FL 34236 US

Title: D ( ) Delete  
Name: BAYNARD, LESTER  
Address: 22 SOUTH LINKS AVE  
City-St-Zip: SARASOTA, FL 34236 US

Title: D ( ) Delete  
Name: MCDANIEL, RICK  
Address: 22 SOUTH LINKS AVE  
City-St-Zip: SARASOTA, FL 34236 US

Title: D ( ) Delete  
Name: SEIDERS, TERRY  
Address: 22 SOUTH LINKS  
City-St-Zip: SARASOTA, FL 34236 US

Title: D ( ) Delete  
Name: ULRICH, LISA  
Address: 22 SOUTH LINKS AVE  
City-St-Zip: SARASOTA, FL 34236 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNIS GRINSTEINER

CFO

02/11/2009

Electronic Signature of Signing Officer or Director

Date