

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000012815

FILED
Mar 24, 2009
Secretary of State

Entity Name: COMMUNITY BANK INTERNAL AUDIT, INC.

Current Principal Place of Business:

132 STANHOPE CIR.
NAPLES, FL 34104

New Principal Place of Business:

6940 BOTTLE BRUSH LANE
NAPLES, FL 34109

Current Mailing Address:

132 STANHOPE CIR.
NAPLES, FL 34104

New Mailing Address:

6940 BOTTLE BRUSH LANE
NAPLES, FL 34109

FEI Number: 65-0980616

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRAKE, TIMOTHY E
132 STANHOPE CIR.
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

DRAKE, TIMOTHY E
6940 BOTTLE BRUSH LANE
NAPLES, FL 34109 US

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: TIMOTHY E. DRAKE

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DRAKE, TIMOTHY E
Address: 132 STANHOPE CIRCLE
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DRAKE, TIMOTHY E
Address: 6940 BOTTLE BRUSH LANE
City-St-Zip: NAPLES, FL 34109

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: TIMOTHY E. DRAKE

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

Date