

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000026997

FILED
Apr 16, 2009
Secretary of State

Entity Name: FLORIDA COMMUNITY BANKSHARES, INC.

Current Principal Place of Business:

1603 S.W. 19TH AVENUE
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

1603 S.W. 19TH AVENUE
OCALA, FL 34474

New Mailing Address:

FEI Number: 59-3668446

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAILEY, HUGH F
1603 S.W. 19TH AVENUE
OCALA, FL 34474 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: D () Delete
Name: DAILEY, HUGH F
Address: 1603 S.W. 19TH AVENUE
City-St-Zip: OCALA, FL 34474

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
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Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D () Change (X) Addition
Name: DENYER, DAVID
Address: 1603 SW 19TH AVE
City-St-Zip: OCALA, FL 34474

Title: D () Change (X) Addition
Name: ELLENBERG, KENNETH
Address: 1603 SW 19TH AVE
City-St-Zip: OCALA, FL 34474

Title: D () Change (X) Addition
Name: BAILEY, WINSTON
Address: 1603 SW 19TH AVE
City-St-Zip: OCALA, FL 34474

Title: D () Change (X) Addition
Name: JERNIGAN, JIM
Address: 1603 SW 19TH AVE
City-St-Zip: OCALA, FL 34474

Title: D () Change (X) Addition
Name: ANDERSON, NEAL
Address: 1603 SW 19TH AVE
City-St-Zip: OCALA, FL 34474

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: HUGH F DAILEY

D

04/16/2009

Electronic Signature of Signing Officer or Director

Date