2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000087444

Entity Name: FPB BANCORP, INC.

FILED Apr 06, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	DRT ST. LUCIE LUCIE, FL 349					
Current Mailing Address:			New Maili	New Mailing Address:		
1792 NE JENSEN BEACH BLVD. JENSEN BEACH, FL 34957						
FEI Number: 65-1147861 FEI Number Applied For () FEI Number			FEI Number Not Appl	nber Not Applicable () Certificate of Status Desired (X)		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
SKILES, DAVID W 1301 SE PORT ST LUCIE BLVD PORT SAINT LUCIE, FL 34952 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:						
Electronic Signature of Registered Agent					Date	
Election Carr	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () SKILES, DAVID 1301 SE PORT PORT ST. LUCIE	ST LUCIE BLVD	Title: Name: Address: City-St-Zip:	,	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVC () ZINTER, PAUL A 2882 SE FARLE PORT ST. LUCIE	Y RD	Title: Name: Address: City-St-Zip:	ZINTER, PAU 2882 SE FAR		
Title: Name: Address: City-St-Zip:	BERGER, GARY 111 ORANGE AV	/E.	Title: Name: Address: City-St-Zip:	BERGER, GA 111 ORANGE		
Title: Name: Address: City-St-Zip:	D () CUOZZO, DONA 735 COLORADO STUART, FL 34	LD J AVE., STE. 1	Title: Name: Address: City-St-Zip:	CUOZZO, DO	(X) Change()Addition DNALD J DIREC ADO AVE., STE. 1 34994	
Title: Name: Address: City-St-Zip:	DS () DECKER, ANN L 355 NE ELM TEI JENSEN BEACH	RR	Title: Name: Address: City-St-Zip:	DECKER, AN 355 NE ELM	(X) Change()Addition IN L SEC/DIR TERR ACH, FL 34957	
Title: Name: Address: City-St-Zip:	D () MIRET, PAUL J 7950 POPPY HII PORT ST. LUCIE		Title: Name: Address: City-St-Zip:	MIRET, PAUL 7950 POPPY		

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: NANCY E. AUMACK, SVP/CFO SVP 04/06/2009