

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000094075

Entity Name: FIRST COLUMBIA BANCORP, INC.

FILED
Jan 04, 2008
Secretary of State

Current Principal Place of Business:

173 NW HILLBORO STREET
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

P.O BOX 1609
LAKE CITY, FL 32056

New Mailing Address:

FEI Number: 01-0676991

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAYLOR, BRUCE A
173 NW HILLBORO STREET
LAKE CITY, FL 32055 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: DC () Delete
Name: SUMMERS, GORDON P
Address: 101 LAKE VISTA LANE
City-St-Zip: LAKE CITY, FL 32055

Title: SD () Delete
Name: COLLINS, MICHEAL
Address: ROUTE 8, BOX 875
City-St-Zip: LAKE CITY, FL 32055

Title: PD () Delete
Name: NAYLOR, BRUCE A
Address: 377 NW FOREST MEADOWS AVENUE
City-St-Zip: LAKE CITY, FL 32055

Title: D () Delete
Name: GREEN, ROBIN C
Address: 2250 INGLEWOOD DRIVE
City-St-Zip: LAKE CITY, FL 32055

Title: D () Delete
Name: GREEN, R.L.
Address: 1126 SOUTH CHURCH STREET
City-St-Zip: LAKE CITY, FL 32055

Title: D () Delete
Name: SCAFF, LESTER
Address: 2200 EAST DUVAL STREET
City-St-Zip: LAKE CITY, FL 32055

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
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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: LARRY W. SISCO

SVP

01/04/2008

Electronic Signature of Signing Officer or Director

Date