

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000094075

Entity Name: FIRST COLUMBIA BANCORP, INC.

FILED  
Jan 05, 2011  
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

## OFFICERS AND DIRECTORS:

Title: DC  
Name: SUMMERS, GORDON P  
Address: 101 LAKE VISTA LANE  
City-St-Zip: LAKE CITY, FL 32055

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

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

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: LARRY SISCO

SVP

01/05/2011

Electronic Signature of Signing Officer or Director

Date