## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1/15

## **FILED** Feb 07, 2003 8:00 am Secretary of State

DOCUMENT # P0100094075  1. Entity Name FIRST COLUMBIA BANCORP, INC.				)	300.00	
Principal Place of Business 127 W HILLSBORO ST LAKE CITY FL 32055		Mailing Address P.O BOX 1609 LAKE CITY FL 32056				
2. Principal Place of Business		3. Mailing Address		I INSTITUTE OF THE STATE OF THE PARTY OF THE	BELLE LEUR BIELL MOULL LOBEL CHU Jear	
173 NW Hillsboro Street		Suite, Apt. #, etc.		El ausay lists is that	ZINO CHANCEC	
Suite, Apt. #, etc.				01-067693		
City & State		City & State		4. FEI Number APPLIED FOR	Applied For Not Applicable	
Lake City, Florida		Zip Country			\$8.75 Additional	
Zip	Country U.S.			5. Certificate of Status Desired	Fee Required	
32055	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registe	red Agent	
Name  So see the proposed in the particular of t						
NAYLOR, BRUCE A			Street Address	Street Address (P.O. Box Number is Not Acceptable) 173 NW Hillsboro Street		
127 W HILLSBORO ST						
LAKE CITY FL 32055				Daite CYCy, Florida		
			Lake Ci	City Lake City FL 32055 red office or registered agent, or both, in the State of Floriday I am familiar with, and accept		
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  Signature typed or printed name of registered agent and title if applicable.  (NOTE: Registered Agent signature required when reinstaling)  PLE NOW!!! FEE IS \$150.00  9. Election Campaign Financing \$5.00 May Be Affair May 1 2003 Fee will be \$550.00						
Make Check Payable to Florida Department of State						
10.	OFFICERS AND		11,	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 11	
TITLE	DC	☐ Delete	TITLE :	•	Change Addition Change Addition Change Addition	
NAME STREET ADDRESS	SUMMERS, GORDON P 101 LAKE VISTA LANE		STREET ADDRESS		.   42	
CITY-SI-ZIP	LAKE CITY FL 32055		CITY-ST-ZIP			
TITLE	SD	☐ Delete	TITLE	0.188	☐ Change ☐ Addition ☐ 등	
NAME	COLLINS, MICHEAL		NAME STREET ADDRESS	The me		
STREET ADORESS CITY-ST-ZIP	ROUTE 8, BOX 875 LAKE CITY FL 32055	_	CITY-ST-ZP	91		
TITLE	PD PD	☐ Delete	TITLE	9	☐ Change ☐ Addition	
NAME .	NAYLOR, BRUCE A	معرف مصحف عدموستان	NAME STREET ADDRESS			
STREET ADDRESS (	377 NW FOREST MEADOWS A	VENUE	CITY-ST-ZIP			
TITLE	LAKE CITY FL 32055	☐ Delete	TITLE		☐ Change ☐ Addition	
NAME	GREEN, ROBIN C	. —	NAME			
STREET ADDRESS	2250 INGLEWOOD DRIVE		STREET ADDRESS CITY-ST-ZIP			
CITY-ST-ZIP	LAKE CITY FL 32055	☐ Delete	TITLE		☐ Change ☐ Addition	
TITLE NAME	D   Green, R.L.	□ Deige	NAME	•		
STREET ADORESS	1126 SOUTH CHURCH STREET	•	STREET ADDRESS			
CITY-ST-ZIP	LAKE CITY FL 32055	<u> </u>	CITY-ST-2IP		Change Addition	
TITLE	D	☐ Delete	TITLE NAME		C thange C rounding	
NAME STREET ADORESS	SCAFF, LESTER		STREET ADDRESS			
CITY-ST-ZIP	2200 EAST DUVAL STREET LAKE CITY FL 32055		CITY-ST-ZIP			
12. I hereby	certify that the information supplied w	th this filling does not qualify fo	r the exemption stated in	Section 119.07(3)(i), Florida Statutes. I furthe same legal effect as if made under oath; t	er certify that the information hat I am an officer or director	

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIMATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

Date

386-754-8888

Attachment

First Columbia Bancorp, Inc. Second Page – Item #11

P01000094075 p, Inc. 55 (V.5239

D Nelson, Genevieve S. 1859 SW Paloma Court Lake City, FL 32025

D Page, Martin S 228 East Duval Street Lake City, FL 32055

D Ronsonet, Norbie 2371 Inglewood Drive Lake City, FL 32055

Foreman, Ron Route 8 Box 874 Lake City, FL 32055