2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 14, 2008 8:00 am Secretary of State

DOCUMENT # P02000131773 1. Entity Name THE PALM BANK)	04-14-2008 9	90038 004 1	***150.	00				
Principal Place 612 S DALE I TAMPA, EL 3	MARRY HWY	Mailing Address 612 S DALE MABRY HWY TAMPA PL 33009				40067		PS 14 18P2				
ಎ ೨೦ ಎ '	lace of Business - No P.O. Box # MACDILL AVE	10809										
Suite, Apt.		Suite, Apt. #, etc.		02112008	Chg-P	CR2E034	<u>` </u>					
City & State	PA, FL	City & State TAMPA	FL	4. FEI Number 04-3730	999			plied For Applicable				
336	a9 USA	33679	ountry SA	5. Certificate of	Status Desired		3.75 Addi e Required					
	6. Name and Address of Current R	egistered Agent	Name	7. Name and A	ddress of New R	tegistered Age	ent					
			(P.O. Box Number	is Not Acceptable	a)							
,			Street Address (P.O. Box Number is Not Acceptable)									
			City			EI	Zip Code)				
8. 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. I am familiar with, and accept												
the obligations of registered agent.												
SIGNATURE_	Signature, typed or printed name of registered agent an	nd little it applicable. (NOTE: Regi	istered Agent signature requir	ed when reinstating)		DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees												
		U Hast and Contributi	ion. L. Ac	Joed to Fees								
10.	OFFICERS AND D	DIRECTORS	11.		HANGES TO OFF							
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete			HANGES TO OFF		IRECTORS Change	S IN 11				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND D A KINS, MICHAEL C 1213 S DRUID LANE TAMPA, FL 33629 DP ANDERSON, ALBERT C 2625 NORTH DUNDEE AVE	Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		HANGES TO OFF	C						
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. Further certify that it 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 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 in Block 10 or Block 11 if chapter 607 or an attachment with an address, with all other like empowered.

SIGNATURE:			Vickie Houlli	s 2.8.08	813 874-147
	SIGNATURE AND	Date	Daytime Phone #		

ATTACHMENT 4006 473 ATTACHMENT TO DOCUMENT #P02000131773

THE DALM DAME

THE PALM BANK

D

Haines, William L. 120 Fifith Ave., 11th Floor New York, NY 10028

D

May, Michael A. 4929 S. Melrose Ave. Tampa, FL 33629

D

Williams, K.C. 1560 W. Cleveland St. Tampa, FL 33606

VΡ

Clendenin, Lawrence 1447 51st Avenue NE St. Petersburg, FL 33703

VP

Culm, Ronald 2711 Woodview Court Clearwater, FL 33761

S

Doling, Linda 3618 W. Tampa Cir. Tampa, FL 33629

SVP

Lopez, Mark 4805 W. Leona Street Tampa, Florida 33629

VΡ

Pepper, Nancy 502 S. Fremont Ave Apt. 724 Tampa, FL 33606

Director of Marketing

Wagner, Shari 3301 Bayshore Blvd. #1901 Tampa, Florida 33629 D/C

Langford, Eugene C. 1715 W. Cleveland St. Tampa, FL 33606

D

Sadlowski, Ronald W. 5115 Longfellow Ave. Tampa, FL 33629

SVP

Contat, Andria 314 Craft Road Brandon, FL 33511

AVP

DelVecchio, Kelly 4397 Rutledge Dr. Palm Harbor, FL 34685

Office Manager

Gaskill, Patricia 805 Island Walk Drive Tampa, FL 33606

SVP

Holley, William B. 1017 Toski Drive New Port Richey, Florida 34655

SVP

Thompson, Ruth 3151 Landmark Drive, #121 Clearwater, Florida 33761

AVP

Carswell, Candace M. 6208 Gondola Dr. Riverview, FI 33569