

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000016871

FILED
Jan 27, 2004
Secretary of State

Entity Name: OLD HARBOR BANK

Current Principal Place of Business:

2605 ENTERPRISE RD E, STE 100
CLEARWATER, FL 33759

New Principal Place of Business:

2605 ENTERPRISE RD E,
SUITE 100
CLEARWATER, FL 33759

Current Mailing Address:

2605 ENTERPRISE RD E, STE 100
CLEARWATER, FL 33759

New Mailing Address:

2605 ENTERPRISE RD E,
SUITE 100
CLEARWATER, FL 33759

FEI Number: 04-3725065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MILLER, BARRY K PRES.
2605 ENTERPRISE ROAD E.
SUITE 100
CLEARWATER, FL 33759

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: BARRY K. MILLER

01/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DEAN, MICHAEL J
Address: 1425 SAN MATEO DR
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: FILLMON, AUSTIN L
Address: 90 HIGHLAND AVE S, APT 305
City-St-Zip: TARPON SPRINGS, FL 34689

Title: D () Delete
Name: HILL, JAMES C JR
Address: 3796 42ND AVE S
City-St-Zip: ST PETERSBURG, FL 33711

Title: D () Delete
Name: JONES, BRIAN M
Address: 211 RUE DES CHATEAUX
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D () Delete
Name: KELTNER, CARL H
Address: 961 MCLEAN ST
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: MILLER, BARRY K
Address: 8115 COTTONWOOD CT
City-St-Zip: SEMINOLE, FL 33776

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
Name:
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 for the exemption stated in Section 119.07(3)(i), 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: BARRY K. MILLER

PRES

01/27/2004

Electronic Signature of Signing Officer or Director

Date