

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000068742

FILED  
Jun 16, 2009  
Secretary of State

Entity Name: CITIZENS BANKING CORPORATION

## Current Principal Place of Business:

2 EAST WALL STREET  
FROSTPROOF, FL 33843

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 7  
FROSTPROOF, FL 338430007

## New Mailing Address:

P.O. BOX 3400  
LAKE WALES, FL 33859-430

FEI Number: 20-0356440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHITBY, JACQUELINE  
222 STATE ROAD 60 EAST  
LAKE WALES, FL 33853 US

## Name and Address of New Registered Agent:

HART, RONALD W CFO  
222 STATE ROAD 60 EAST  
LAKE WALES, FL 33853 US

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: RONALD W. HART, CFO

06/16/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: DS ( ) Delete  
Name: HOOD, CRADDOCK F  
Address: 223 LAKE LINK RD  
City-St-Zip: WINTER HAVEN, FL 33884

Title: DP ( ) Delete  
Name: LITTLETON, GREG  
Address: 149 LAKE MARIAM RD.  
City-St-Zip: WINTER HAVEN, FL 33884

Title: DC ( ) Delete  
Name: WILSON, P T  
Address: 122 MOUNTAIN LAKE ESTATES  
City-St-Zip: LAKE WALES, FL 33853

Title: D ( ) Delete  
Name: WILSON, PATRICIA  
Address: 2028 TUILERIES COVE  
City-St-Zip: BILOXI, MS 39531

Title: D ( ) Delete  
Name: WILSON, LATIMER T  
Address: 200 AIRPORT ROAD  
City-St-Zip: FROSTPROOF, FL 33843

Title: D (X) Delete  
Name: WILSON, CLAYTON G  
Address: P.O. BOX 832  
City-St-Zip: LAKE WALES, FL 33859

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DC (X) Change ( ) Addition  
Name: WILSON, LATIMER T  
Address: 200 AIRPORT ROAD  
City-St-Zip: FROSTPROOF, FL 33843

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: WILSON, CLAYTON G  
Address: P.O. BOX 832  
City-St-Zip: LAKE WALES, FL 33859

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: GREG LITTLETON

DP

06/16/2009

Electronic Signature of Signing Officer or Director

Date