

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000068742

FILED
Mar 21, 2012
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 3400
ATTN: ACCOUNTING DEPT.
LAKE WALES, FL 33859

New Mailing Address:

FEI Number: 20-0356440 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BROWN, TIM E CFO
222 STATE ROAD 60 EAST
LAKE WALES, FL 33853 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: DS
Name: CRADDOCK, HOOD F
Address: 223 LAKE LINK RD
City-St-Zip: WINTER HAVEN, FL 33884

Title: DP
Name: LITTLETON, GREG
Address: 275 LAKE LINK RD
City-St-Zip: WINTER HAVEN, FL 33884

Title: DC
Name: WILSON, LATIMER T
Address: 200 AIRPORT ROAD
City-St-Zip: FROSTPROOF, FL 33843

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

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

Title: D
Name: TOUCHTON, DAVID M
Address: 6950 NUNN RD
City-St-Zip: LAKELAND, FL 33813

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: GREG LITTLETON

CEO

03/21/2012

Electronic Signature of Signing Officer or Director

Date