

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000089313

Entity Name: CNLBANK, FIRST COAST

FILED  
Mar 20, 2008  
Secretary of State

## Current Principal Place of Business:

10739 DEERWOOD PARK BOULEVARD.  
SUITE 100  
JACKSONVILLE, FL 32256

## New Principal Place of Business:

## Current Mailing Address:

10739 DEERWOOD PARK BOULEVARD  
SUITE 100  
JACKSONVILLE, FL 32256

## New Mailing Address:

FEI Number: 20-1448345

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, JAMES A  
361 SUMMERSET DRIVE  
JACKSONVILLE, FL 32259 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: JAMES A. MILLER

03/20/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ANDERSON, JOHN K JR  
Address: 101 KINGFISHER DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D ( ) Delete  
Name: COLLINS, MICHAEL C  
Address: 660 OSCEOLA AVE., #101  
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete  
Name: HANNA, LEE E  
Address: 13570 MANDARIN ROAD  
City-St-Zip: JACKSONVILLE, FL 32223

Title: D ( ) Delete  
Name: KENYON, MATTHEW  
Address: 3020 LAKE SHORE BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: MCKINNEY, DAVID F  
Address: 3131 MIDDLESEX ROAD  
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete  
Name: MILLER, JAMES A  
Address: 361 SUMMERSET DRIVE  
City-St-Zip: JACKSONVILLE, FL 32259

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: NEWMAN, CHARLES  
Address: 24769 HARBOUR VIEW DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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

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

Title: D (X) Change ( ) Addition  
Name: ST. JOHN, DAN J  
Address: 1158-68 FRUIT COVE RD  
City-St-Zip: JACKSONVILLE, FL 32259

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: JAMES A. MILLER

D

03/20/2008

Electronic Signature of Signing Officer or Director

Date