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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: Premier Community Bank of the Emerald Coast Name of Corporation						
DOCUMENT NUMBER: P0600090185						
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Ashley J. Flowers Name of Contact Person						
Premier Community Bank of the Emerald Coast						
Firm/Company						
345 E James Lee Blvd Address						
Crestview, FL 32539 City/State and Zip Code						
aflowers@premiercbank.com  E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Ashley J. Flowers	at ( 850 ) 683-8822  Area Code & Daytime Telephone Number					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Department of State.						
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chi	ange is submitted for a co	rporation organiz	607.1508, or 617.1508, Flo ed under the laws of the Sta ed agent, or both, in the Sta	nte of Florida
	•		ty Bank of the Eme d, Crestview, FL 3253	
3. The mailing	address (if different): Sa	me		
4. Date of incor	poration/qualification:	7-7-2006	Document number:	P06000090185
	d street address of the cur rtment of State: (If resign		nt and registered office on t	
	James M. Blalock	resigned)		
	1015 Stanley Lane			2 3
	Baker, FL 32531			
6. The name and (if changed):	d street address of the nev	v registered agent (	(if changed) and /or register	11 MAY 27 AM 8: 35
	Ashley J. Flowers			
	345 E. James Lee			
	Crestview, FL 325	P.O. Box NOT a	cceptable	
The street addr			ldress of the business offic	e of its registered agent,
Such change wauthorized by t	as authorized by resoluti he board, or the corporat	on duly adopted b	by its board of directors or fied in writing of the chang	by an officer so
Solle	up of an officer or director	<del>****</del>		Flowers
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as regito comply with the proving I am familiar with and ing filed merely to reflect to been notified in writing	stered agent and a sions of all statute I accept the obliga t a change in the i t of this change.	agree to act in this capaci es relative to the proper ar ation of my position as reg registered office address, i	ty. id complete performance vistered agent. Or, if this I hereby confirm that the
Shortle Sp	Phanure of Registered Agent	<del>6</del>		//
If signing on be	chalf of an entity:  T. Flower  (yped or Printed Name	<b>'</b>	, ,	

\* \* \* FILING FEE: \$35.00 \* \* \*