

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000139578

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: PREFERRED COMMUNITY BANK

## Current Principal Place of Business:

4391 COLONIAL BOULEVARD, SUITE 124  
FORT MYERS, FL 33966

## New Principal Place of Business:

## Current Mailing Address:

4391 COLONIAL BOULEVARD, SUITE 124  
FORT MYERS, FL 33966

## New Mailing Address:

FEI Number: 20-3294197

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BAGANS, ROBERT C  
Address: 1687 MCGREGOR RESERVE DR  
City-St-Zip: FT MYERS, FL 33901

Title: D ( ) Delete  
Name: O'NEIL, BRENDA M  
Address: 1352 CEMETERY ROAD  
City-St-Zip: LABELLE, FL 33935

Title: D ( ) Delete  
Name: RICE, JEFFREY J  
Address: 15441 QUEENSFERRY DR  
City-St-Zip: FT MYERS, FL 33912

Title: D ( ) Delete  
Name: SHEELEY, MICHAEL K  
Address: 15661 OLD WEDGEWOOD CT  
City-St-Zip: FT MYERS, FL 33908

Title: D ( ) Delete  
Name: SCOLA, VINCENT A  
Address: 23601 WATERSIDE DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34134

## 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:

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: LINDA BORTON

AVP

04/16/2009

Electronic Signature of Signing Officer or Director

Date