

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000034421

FILED
Apr 17, 2008
Secretary of State

Entity Name: COMMUNITY BANK, DESTIN

Current Principal Place of Business:

34940 EMERALD COAST PARKWAY (U.S. HWY 98)
DESTIN, FL

New Principal Place of Business:

12590 EMERALD COAST PARKWAY
MIRAMAR BEACH, FL 32550

Current Mailing Address:

34940 EMERALD COAST PARKWAY (U.S. HWY 98)
DESTIN, FL

New Mailing Address:

12590 EMERALD COAST PARKWAY
MIRAMAR BEACH, FL 32550

FEI Number: 20-8925827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BEAUCHAMP, BRADFORD F
Address: 665 WESTERN LAKE DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D () Delete
Name: CHAPMAN, DAVID H
Address: 144 COUNTRY CLUB DRIVE WEST
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: COLBERT, THOMAS W
Address: 161 WINDRUSH DRIVE
City-St-Zip: FLOWOOD, MS 39232

Title: D () Delete
Name: CONERLY, LAMAR A JR
Address: 10 BALLAMORE DRIVE
City-St-Zip: DESTIN, FL 32550

Title: D () Delete
Name: EUBANKS, A. SHAUN
Address: 272 CHAMPION COURT
City-St-Zip: DESTIN, FL 32544

Title: D () Delete
Name: NEWMAN, BOBBY R
Address: 4151 INDIAN TRAIL
City-St-Zip: DESTIN, FL 32541

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: DP (X) Change () Addition
Name: EUBANKS, A. SHAUN
Address: 272 CHAMPION COURT
City-St-Zip: DESTIN, FL 32544

Title: D (X) Change () Addition
Name: NEWMAN, BOBBY R
Address: 4151 EAST INDIAN TRAIL
City-St-Zip: DESTIN, FL 32541

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: KATHY LEIBOLD

CFO

04/17/2008

Electronic Signature of Signing Officer or Director

Date