2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000079370

Entity Name: 1ST MANATEE BANK

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 12215 U.S. HIGHWAY 301 NORTH 12204 COUNTY ROAD 675 PARRISH, FL 34219 PARRISH, FL 34219 **Current Mailing Address: New Mailing Address:** 12215 U.S. HIGHWAY 301 NORTH P O BOX 181 PARRISH, FL 34219 PARRISH, FL 34219 FEI Number: 42-1728226 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: CHIEF FINANCIAL OFFICER 200 E. GAINES ST TALLAHASSEE, FL 323146200 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SMITH, GEORGE T Name: Name: 5060 18TH AVENUE WEST Address: Address: City-St-Zip: BRADENTON, FL 34209 City-St-Zip: Title: Title: () Delete () Change () Addition Name: HODGSON, THOMAS L Name: 3602 WILDERNESS BLVD. EAST Address: Address: PARRISH, FL 34219 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition PINARDI, NORMAN J Name: Name: 2306 PALMA SOLA BOULEVARD Address: Address: City-St-Zip: BRADENTON, FL 34209 City-St-Zip: Title: () Delete Title: () Change () Addition BELLINO, ROBERT J M.D. Name: Name: Address: 1450 59TH STREET WEST Address: City-St-Zip: BRADENTON, FL 34209 City-St-Zip: Title: () Delete Title: () Change () Addition WELLS, LESLIE Name: Name: 11001 25TH STREET EAST Address: Address: City-St-Zip: PARRISH, FL 34219 City-St-Zip: Title: () Delete Title: () Change () Addition SPIVEY, TONY Name: Name: 5715 38TH AVENUE EAST Address: Address: City-St-Zip: City-St-Zip: BRADENTON, FL 34208

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: BRIAN M WATTERSON SVP 01/04/2008