

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000003435

Entity Name: INTRACOASTAL BANK

FILED  
Jan 05, 2009  
Secretary of State

## Current Principal Place of Business:

1290 PALM COAST PARKWAY NW  
PALM COAST, FL 32137

## New Principal Place of Business:

## Current Mailing Address:

1290 PALM COAST PARKWAY NW  
PALM COAST, FL 32137

## New Mailing Address:

FEI Number: 26-1783674

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: BAYLOR, ALBERT W  
Address: 1860 COUNTY ROAD 2006  
City-St-Zip: BUNNELL, FL 32110

Title: D ( ) Delete  
Name: CHIUMENTO, MICHAEL D  
Address: 4B OLD KINGS ROAD N  
City-St-Zip: PALM COAST, FL 32137

Title: D ( ) Delete  
Name: CREWS, C. SCOTT  
Address: 2123 N. CENTRAL AVE  
City-St-Zip: FLAGLER BEACH, FL 32136

Title: D ( ) Delete  
Name: DEVORE, ROBERT  
Address: 64 CHRISTOPHER COURT  
City-St-Zip: PALM COAST, FL 32137

Title: D ( ) Delete  
Name: GIBBS, THOMAS L  
Address: 33 SUGAR MILL LANE  
City-St-Zip: FLAGLER BEACH, FL 32136

Title: D ( ) Delete  
Name: JOHNSTON, ALBERT B JR  
Address: 350 WEST BLACK POINT RD  
City-St-Zip: BUNNELL, FL 32110

## 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:

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: THOMAS B. HURY

CFO

01/05/2009

Electronic Signature of Signing Officer or Director

Date