

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000091593

FILED  
Apr 08, 2005  
Secretary of State

Entity Name: PEOPLES BANK

## Current Principal Place of Business:

32845 US HIGHWAY 19  
PALM HARBOR, FL

## New Principal Place of Business:

32845 US HIGHWAY 19  
PALM HARBOR, FL 34684

## Current Mailing Address:

32845 US HIGHWAY 19  
PALM HARBOR, FL

## New Mailing Address:

32845 US HIGHWAY 19  
PALM HARBOR, FL 34684

FEI Number: 59-3352277

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:

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:

04/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BRANDON, DAVID L  
Address: 557 US ALT. 19  
City-St-Zip: PALM HARBOR, FL 34683

Title: D ( ) Delete  
Name: DUNBAR, DAVID W  
Address: 32845 US 19  
City-St-Zip: PALM HARBOR, FL 34684

Title: D ( ) Delete  
Name: MARKS, KEN JR  
Address: P O BOX 2336  
City-St-Zip: CLEARWATER, FL 33757

Title: D ( ) Delete  
Name: KALTENBACH, DONALD F  
Address: 8445 CESSNA DR  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: D ( ) Delete  
Name: NELSON, DAVID F  
Address: 3483 ALTERNATE 19  
City-St-Zip: PALM HARBOR, FL 34683

Title: D ( ) Delete  
Name: LATVALA, WOODROW J  
Address: 109 PHILLIPS WAY  
City-St-Zip: PALM HARBOR, FL 34683

## 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 for the exemption stated in Section 119.07(3)(i), 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: JOANNE M. BROOKINS

SVP

04/08/2005

Electronic Signature of Signing Officer or Director

Date