

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 04, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000063615**

1. Entity Name  
**FIRST NATIONAL, INC.**



Principal Place of Business  
**9324 SUN RIVER WAY  
ESTERO, FL 33928 US**

Mailing Address  
**9324 SUN RIVER WAY  
ESTERO, FL 33928 US**



01082008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3393512</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**6. Name and Address of Current Registered Agent**

**GROSSER, LAWRENCE  
9324 SUN RIVER WAY  
ESTERIO, FL 33928**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**U000000813740**  
**02/13/08-80017-010 150.00**

**10. OFFICERS AND DIRECTORS**

TITLE	PRES
NAME	GROSSER, SUSAN
STREET ADDRESS	9324 SUN RIVER WAY
CITY-ST-ZIP	ESTERO, FL 33928

TITLE	SECT
NAME	GROSSER, LAWRENCE
STREET ADDRESS	9324 SUN RIVER WAY
CITY-ST-ZIP	ESTERO, FL 33928

TITLE	VP
NAME	GROSSER, LAWRENCE
STREET ADDRESS	9324 SUN RIVER WAY
CITY-ST-ZIP	ESTERO, FL 33928

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_

**LAWRENCE GROSSER**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/31/08**  
Date

**561-718-6008**  
Daytime Phone #