

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000084900**

1. Corporation Name

Premier Community Bank

2. Principal Office Address

160 Pointe Loop Drive

Suite, Apt. #, etc.

City & State

Venice, FL

Zip

34284

Country

US

3. Mailing Office Address

160 Pointe Loop Drive

Suite, Apt. #, etc.

City & State

Venice, FL

Zip

34284

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

10/15/96

5. FEI Number

650656762

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	WILLIAM BACON	23495 WESTCHESTER BLVD.	PORT CHARLOTTE, FL 33980
D	JON BRADFORD BALDWIN	1603 GASPARILLA DR. S.	BOCA GRANDE, FL 33921
D	DAVID M. DIGNAM	5150 THE POINT DRIVE	ENGLEWOOD, FL 34223
D	THOMAS B. HUNTER	1624 JEAN LA FITTE	BOCA GRANDE, FL 33921
D/P	JAMES F. KUHLMAN	1440 MACKINTOSH BLVD.	NOKOMIS, FL 34275
D	GEORGE D. PICKHARDT	1018 DEER RUN	VENICE, FL 34293

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

02-07-02

(941) 496-9696

Date

Daytime Phone #

NOTE: See attached for additional director listing.

FILED

02 FEB -8 PM 2:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 01-02

CR2E081 (9/01)

282

**STATE OF FLORIDA
REINSTATEMENT APPLICATION
PREMIER COMMUNITY BANK**

Item 9 – List of current Directors – Continued

D Terrence R. Riley
344 Dolphin Shores Circle
Nokomis, FL 34275

D Price W. Schwenck
418 Buttonwood Lane
Largo, FL 33770

D Douglas W. Smith
1444 Lemon Bay Drive
Englewood, FL 34223

D Harrison I. Steans
6470 Manasota Key Road
Englewood, FL 34223

D Tommy H. Taylor, Jr.
421 Huntridge Drive
Venice, FL 34292