

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000065334

FILED
Feb 11, 2009
Secretary of State

Entity Name: FIRST STATE FINANCIAL CORPORATION

Current Principal Place of Business:

22 SOUTH LINKS AVENUE
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

22 SOUTH LINKS AVENUE
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 65-0771145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRENCH, TED
2033 MAIN STREET
SUITE 304
SARASOTA, FL 34236 US

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARRINGTON, DANIEL
Address: 22 SOUTH LINKS AVE
City-St-Zip: SARASOTA, FL 34236 US

Title: D () Delete
Name: BEYMER, ROBERT H
Address: 22 SOUTH LINKS AVE
City-St-Zip: SARASOTA, FL 34236 US

Title: D () Delete
Name: SHELL, ROBERT L JR.
Address: 22 SOUTH LINKS AVE
City-St-Zip: SARASOTA, FL 34236 US

Title: C () Delete
Name: SCAGGS, NEAL W
Address: 22 SOUTH LINKS AVE
City-St-Zip: SARASOTA, FL 34236 US

Title: D () Delete
Name: WRIGHT, THOMAS W
Address: 22 SOUTH LINKS AVE
City-St-Zip: SARASOTA, FL 34236 US

Title: DP () Delete
Name: WILKINSON, JED
Address: 22 SOUTH LINKS AVE
City-St-Zip: SARASOTA, FL 34235 US

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: DENNIS GRINSTEINER

CFO

02/11/2009

Electronic Signature of Signing Officer or Director

_____ Date