

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000014879

FILED
Feb 05, 2007
Secretary of State

Entity Name: LANDMARK FINANCIAL HOLDING COMPANY

Current Principal Place of Business:

544 S. WASHINGTON BLVD.
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5737
SARASOTA, FL 34277

New Mailing Address:

FEI Number: 58-2384540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUALE, THOMAS G
544 S. WASHINGTON BLVD.
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: PENNINGTON, GERALD L
Address: 285 SUGAR MILL DRIVE
City-St-Zip: OSPREY, FL 34229

Title: D () Delete
Name: STEELE, JOHN M
Address: 1828 ROLAND ST
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: AYERS, ANNETTE
Address: 540 N. CASEY KEY ROAD
City-St-Zip: OSPREY, FL 34229

Title: D () Delete
Name: QUALE, THOMAS G
Address: 544 SOUTH WASHINGTON BLVD
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: SUPLEE, RAYMOND T
Address: 1742 SEMINOLE DRIVE
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: DABNEY, THOMAS G
Address: 4600 CAMINO REAL
City-St-Zip: SARASOTA, FL 34231

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
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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 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: JULIE K. LONGABACH

CFO

02/05/2007

Electronic Signature of Signing Officer or Director

_____ Date