

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 01, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P98000054182

1. Entity Name  
FIRST NATIONAL BANCSHARES, INC.



Principal Place of Business

5817 MANATEE AVE WEST  
BRADENTON, FL 34209

Mailing Address

5817 MANATEE AVE WEST  
BRADENTON, FL 34209

**DO NOT WRITE IN THIS SPACE**



03212005 No Chg-P CR2E034 (10/03)

4. FEI Number  
06-1522028

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

FAUSSET, GLEN W  
C/O 1ST NATIONAL BANK & TRUST  
5817 MANATEE AVE WEST  
BRADENTON, FL 34209

**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, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE CD  
NAME DUPONT, FRANCIS I III  
STREET ADDRESS 5817 MANATEE AVENUE WEST  
CITY-ST-ZIP BRADENTON, FL 34209

TITLE PD  
NAME FAUSSET, GLEN W  
STREET ADDRESS 5817 MANATEE AVENUE WEST  
CITY-ST-ZIP BRADENTON, FL 34209

TITLE T  
NAME MATEJCEK, ROBERT  
STREET ADDRESS 5817 MANATEE AVENUE WEST  
CITY-ST-ZIP BRADENTON, FL 34209

TITLE S  
NAME O'REILLY, ANGELA A  
STREET ADDRESS 5817 MANATEE AVENUE WEST  
CITY-ST-ZIP BRADENTON, FL 34209

TITLE D  
NAME BEALL, BEVERLY  
STREET ADDRESS 5817 MANATEE AVE  
CITY-ST-ZIP BRADENTON, FL 34209

TITLE D  
NAME BLALOCK, ROBERT G  
STREET ADDRESS 5817 MANATEE AVE.  
CITY-ST-ZIP BRADENTON, FL 34209

000000284184  
04/01/05-80057-014 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

*Robert Matejcek*  
Robert Matejcek, Treasurer

3/23/05 941-746-4964

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #