

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000066476

FILED
Apr 13, 2005
Secretary of State

Entity Name: FIRST CAPITAL BANK HOLDING CORPORATION

Current Principal Place of Business:

1891 SOUTH 14 STREET
SUITE A
FERNANDINA BEACH, FL 32034 US

New Principal Place of Business:

1891 SOUTH 14 STREET
FERNANDINA BEACH, FL 32034 US

Current Mailing Address:

1891 SOUTH 14 STREET
FERNANDINA BEACH, FL 32034 US

New Mailing Address:

FEI Number: 59-3532208 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, MARSHALL E ESQ.
1891 SOUTH 14TH STREET
FERNANDINA BEACH, FL 32034 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: GARNER, SUELLEN R
Address: 5205 LEEWARD COVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: SANCHEZ, MICHAEL G
Address: 2788 S. OCEAN OAKS
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: T () Delete
Name: AYERS, TIMOTHY S
Address: 2743 LONG BOAT DRIVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S () Delete
Name: AYERS, TIMOTHY S
Address: 2743 LONG BOAT DRIVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: ANDERSON, RON
Address: 4704 GENOA DRIVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: BRYAN, CHRISTINE
Address: 2006 SUNRISE DRIVE
City-St-Zip: FERNANDINA BEACH, FL 32034

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 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 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: TIMOTHY S AYERS

T

04/13/2005

Electronic Signature of Signing Officer or Director

Date