

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000106998

1. Entity Name

FIRST COMMUNITY BANK OF SOUTHWEST FLORIDA

FILED
Jan 19, 2001 8:00 am
Secretary of State

01-19-2001 90097 049 ***150.00

Principal Place of Business

1565 RED CEDAR DRIVE
FORT MYERS FL 33907

Mailing Address

1565 RED CEDAR DRIVE
FORT MYERS FL 33907

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0860854**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ~~D~~
NAME ~~ANDERSON, ROBERT F~~
STREET ADDRESS ~~4969 JOEWOOD DRIVE~~
CITY-ST-ZIP ~~SANIBEL FL 33957~~

☒ Delete

TITLE DP
NAME BLACK, EDWARD H
STREET ADDRESS 9003 MOCKINGBIRD DRIVE
CITY-ST-ZIP SANIBEL FL 33957

☐ Delete

TITLE D
NAME BRANCH, WILLIAM O
STREET ADDRESS 5260 S LANDINGS DRIVE #1709
CITY-ST-ZIP FORT MYERS FL 33919

☐ Delete

TITLE DC
NAME COURTNEY, JAMES E
STREET ADDRESS 1779 VENUS DRIVE
CITY-ST-ZIP SANIBEL FL 33957

☐ Delete

TITLE D
NAME MALBON, PAUL E
STREET ADDRESS 16340 WILLOWCREST WAY
CITY-ST-ZIP FORT MYERS FL 33908

☐ Delete

TITLE D
NAME MCHALE, GERARD A JR
STREET ADDRESS 4830 LAUREL LANE
CITY-ST-ZIP FORT MYERS FL 33908

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE *DT*
NAME *David Carleton Hall*
STREET ADDRESS *1240 Logan Lane*
CITY-ST-ZIP *Fort Myers, Florida 33919*

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

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☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward H. Black
President

1/5/01

Date

941-939-4100

Daytime Phone #

CR2E034 (10/00)