

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000106998

FILED
Jan 04, 2008
Secretary of State

Entity Name: FIRST COMMUNITY BANK OF SOUTHWEST FLORIDA

Current Principal Place of Business:

1565 RED CEDAR DRIVE
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

1565 RED CEDAR DRIVE
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-0860854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HALL, DAVID C
Address: 1565 RED CEDAR DRIVE
City-St-Zip: FORT MEYERS, FL 33907

Title: S () Delete
Name: MUROLO, CAROL
Address: 1565 RED CEDAR DRIVE
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: BRANCH, WILLIAM O
Address: 5260 S LANDINGS DRIVE #1709
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: TRIPPE, GARY
Address: 1565 RED CEDAR DRIVE
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: MALBON, PAUL E
Address: 16340 WILLOWCREST WAY
City-St-Zip: FORT MYERS, FL 33908

Title: DC () Delete
Name: MCHALE, GERARD A JR
Address: 7146 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HENDERSON, RANDY
Address: 1565 RED CEDAR DRIVE
City-St-Zip: FORT MYERS, FL 33907

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: DAVID C. HALL

DP

01/04/2008

Electronic Signature of Signing Officer or Director

Date