2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005
Secretary of State

DOCUMENT# P99000010372

Entity Name: FIRST HOME BANK

Current Principal Place of Business:

9190 SEMINOLE BLVD.
SEMINOLE, FL

New Principal Place of Business:

Current Mailing Address:

PO BOX 4900
SEMINOLE, FL 33775

New Mailing Address:

FEI Number: 59-3526917 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DELOACH, DENNIS R JR
9190 SEMINOLE BLVD
SEMINOLE, FL 33772 US

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: DENNIS R. DELOACH, JR 01/26/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BARGER, BILLIE A
Address: 6380 33RD AVE N
City-St-Zip: ST. PETERSBURG, FL 33710

Title: DC ( ) Delete
Name: CASTLES, ROBERT G
Address: 8275 113TH STREET, N
City-St-Zip: SEMINOLE, FL 33772

Title: D ( ) Delete
Name: DELOACH, DENNIS R JR
Address: 8640 SEMINOLE BLVD
City-St-Zip: SEMINOLE, FL 33772

Title: D ( ) Delete
Name: DONOVAN, GEORGE C JR
Address: 13356 87TH AVE N
City-St-Zip: SEMINOLE, FL 33776

Title: DP ( ) Delete
Name: FORBES, JEFFORY H
Address: 611 66TH AVE SO
City-St-Zip: ST. PETERSBURG, FL 33705

Title: DS ( ) Delete
Name: MCCMULLEN, CLAUDE D
Address: 8982 SEMINOLE BLVD.
City-St-Zip: SEMINOLE, FL 33772

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: JEFFORY H. FORBES DP 01/26/2005
Electronic Signature of Signing Officer or Director Date