

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90116 036 ***150.00

DOCUMENT # P99000019211			
1. Entity Name PREMIER BANK HOLDING COMPANY			
Principal Place of Business 3110 CAPITAL CIRCLE, N.E. TALLAHASSEE, FL 32308		Mailing Address PO BOX 3606 TALLAHASSEE, FL 32315	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40001000



03312008 Chg-P CR2E034 (12/06)

4. FEI Number 20-0461161	Applied For <input type="checkbox"/> Not
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BROWN, G. MATTHEW PREMIER BANK HOLDING COMPANY 3110 CAPITAL CIRCLE NE TALLAHASSEE, FL 32308		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS	DC BOYLE, DENNIS O 3110 CAPITAL CIRCLE NE TALLAHASSEE, FL 323083706 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change DVP/CEO BROWN, G. MATTHEW 3110 CAPITAL CIR NE TALLAHASSEE, FL 32308 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS	DV LANGFORD, AL 3110 CAPITAL CIR NE TALLAHASSEE, FL 323083708 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change DVICE CHAIR LANGFORD, A. LAWTON 3110 CAPITAL CIR NE TALLAHASSEE, FL 32308 <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS	D HOWELL, WINSTON K 3110 CAPITAL CIR NE TALLAHASSEE, FL 323083706 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change D MITCHELL, CHARLES B 3110 CAPITAL CIR NE TALLAHASSEE, FL 32308 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS	D CAMPS, JOSEPH L JR 3110 CAPITAL CIR NE TALLAHASSEE, FL 323083706 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change EVP KANE, JACK 3110 CAPITAL CIR NE TALLAHASSEE, FL 32308 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS	D HANEY, THOMAS C 3110 CAPITAL CIR NE TALLAHASSEE, FL 323083706 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change EVP/CFO/CORPORATE SECRETARY PALMER, LINDA 3110 CAPITAL CIR NE TALLAHASSEE, FL 32308 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS	D CYNTHIA, PHIPPS G 3110 CAPITAL CIR NE TALLAHASSEE, FL 323083706 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change EVP STAFFORD, KEN 3110 CAPITAL CIR NE TALLAHASSEE, FL 32308 <input checked="" type="checkbox"/> Addition

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

Linda K. Palmer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-08

Date

850-383-9602

Daytime Phone #