

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90207 042 ***150.00

60001083



01042007 Chg-P CR2E034 (12/06)

4. FEI Number **59-3572957** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

James E. Weite, Jr.
President & C.E.O.
1020 W. Granada Blvd.
Ormond Beach, FL 32174

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE

01-08-07

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	CEOD	☐ Delete
NAME	WEITE, JAMES E JR	
STREET ADDRESS	1 CREEK BEND WAY	
CITY - ST - ZIP	ORMOND BEACH, FL 32174	
TITLE	PD	☒ Delete
NAME	PAGE, BRUCE E	
STREET ADDRESS	1520 LAMBERT AVE	
CITY - ST - ZIP	FLAGLER BEACH, FL 32136	
TITLE	D	☐ Delete
NAME	EPTON, JOE P	
STREET ADDRESS	179 JOHN ANDERSON DR	
CITY - ST - ZIP	ORMOND BEACH, FL 32176	
TITLE	D	☐ Delete
NAME	BLANFORD, MARK O	
STREET ADDRESS	27 BULOW WOODS CIRCLE	
CITY - ST - ZIP	FLAGLER BEACH, FL 32136	
TITLE	CD	☐ Delete
NAME	HOLCOMB, JOHN H	
STREET ADDRESS	P.O. BOX 10686	
CITY - ST - ZIP	BIRMINGHAM, AL 35202	
TITLE	D	☐ Delete
NAME	ADAMS, ROBERT L	
STREET ADDRESS	444 SEABREEZE BLVD	
CITY - ST - ZIP	DAYTONA BEACH, FL 32118	

***see attached**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	C.E.O/PD	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/15/2007

CypressCoquina Bank - Direstors

(attachment to page #1)

Last Name	First Name, Middle Initial	Title	Address	City, State, ZIP
Baylor	Albert W	Director	1860 CR 206	Bunnell, FL 32110
Bledsoe	Ronnie	Director	P.O. Box 1626	Ormond Beach, FL 32175
Bolerjack	Daniel J	Director	513 Riverview Blvd.	Daytona Beach, FL 32118
Chanfrau	William M	Director	226 County Club Drive	Ormond Beach, FL 32176
Chiumento	Michael D	Director	48 Old Kings Road	Palm Coast, FL 32137
Crews	C Scott	Director	P.O. Box 69	Bunnell, FL 32110
Culler	Lee C	Director	P.O. Box 1470	Ormond Beach, FL 32175
Jobalia	Dipak D	Director	846 Riverside Drive	Ormond Beach, FL 32176
Keyes	Gerald P	Director	5 Utility Drive Suite #14	Palm Coast, FL 32137
McNab	James M	Director	P.O. Box 1230	Flagler Beach, FL 32136
Voges	William J	Director	275 Clyde Morris Blvd.	Ormond Beach, FL 32174

ATTACHMENT

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