

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2007 08:00 AM
Secretary of State

DOCUMENT # P99000072575

1. Entity Name
SIGNATURE BANK



Principal Place of Business
**100 SECOND AVE NORTH
ST PETERSBURG, FL**

Mailing Address
**100 SECOND AVE NORTH
ST PETERSBURG, FL**



01192007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3592462	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**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

U000000601920
01/26/07-80069-011 158.75

10. OFFICERS AND DIRECTORS

TITLE	CEO
NAME	FEASTER, DAVID P
STREET ADDRESS	100 SECOND AVE NORTH
CITY - ST - ZIP	ST PETERSBURG, FL
TITLE	CD
NAME	HOUGHTON, BETH A
STREET ADDRESS	100 SECOND AVE NORTH
CITY - ST - ZIP	ST PETERSBURG, FL
TITLE	EVP
NAME	COUNTS, NORRIS E
STREET ADDRESS	100 SECOND AVE NORTH
CITY - ST - ZIP	SAINT PETERSBURG, FL 33701
TITLE	SD
NAME	WILLIS ROBERT, H J R
STREET ADDRESS	100 SECOND AVE NORTH
CITY - ST - ZIP	ST PETERSBURG, FL
TITLE	TD
NAME	BOWMAN, JACKSON H IV
STREET ADDRESS	100 SECOND AVE NORTH
CITY - ST - ZIP	ST PETERSBURG, FL
TITLE	AS
NAME	WORTHINGTON, ANN R
STREET ADDRESS	100 SECOND AVE NORTH
CITY - ST - ZIP	SAINT PETERSBURG, FL 33701

**DO NOT WRITE
IN THIS SPACE**

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: Ann Worthington
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/07 (727) 388 2267
Date Daytime Phone #