

S 05633

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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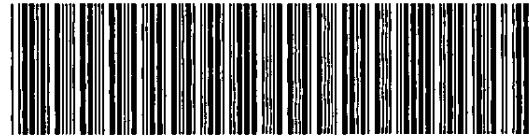
(Business Entity Name)

(Document Number)

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09/27/13--01035--002 **10.00

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FILED
13 SEP 20 PM 4:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

SEP 27 2013

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 4, 2013

JOHN C. MCGEE / FIRST CITY BANK OF FLORIDA
135 PERRY AVENUE SE
FORT WALTON BEACH, FL 32548

SUBJECT: FIRST CITY BANK OF FLORIDA
Ref. Number: S05633

We have received your document for FIRST CITY BANK OF FLORIDA and check(s) totaling \$25.00 of which \$25.00 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$10.00 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$35.00 is due.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 813A00020866

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Florida First City Banks, Inc.
Name of Corporation

DOCUMENT NUMBER: 59-2850066

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John C. McGee
Name of Contact Person

Florida First City Banks, Inc.
Firm/Company

135 Perry Avenue, SE
Address

Fort Walton Beach, Florida 32548
City/State and Zip Code

Bryan@firstcitybank.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John C. McGee at (850) 244-5151
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- Robert E. Bennett, Jr.
135 Perry Avenue, SE
P.O. Box NOT acceptable
Fort Walton Beach, Florida 32548

9.20.12
Date

Typed or Printed Name _____

CR2E045 (03/12)