

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S36570

FILED  
Jul 06, 2004  
Secretary of State

Entity Name: CITIZENS FIRST BANK

**Current Principal Place of Business:**

903 AVENIDA CENTRAL  
THE VILLAGES, FL 32159 US

**New Principal Place of Business:**

**Current Mailing Address:**

903 AVENIDA CENTRAL  
THE VILLAGES, FL 32159 US

**New Mailing Address:**

FEI Number: 59-3018034      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:**

KILLINGSWORTH, THOMAS M  
903 AVENIDA CENTRAL  
THE VILLAGES, FL 32735 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: T. MICHAEL KILLINGSWORTH      07/06/2004  
Electronic Signature of Registered Agent      Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: WISE, JOHN F  
Address: 12290 SW 16TH AVE  
City-St-Zip: OCALA, FL

Title: D (X) Change ( ) Addition  
Name: WISE, JOHN F  
Address: 12290 SW 16TH AVE  
City-St-Zip: OCALA, FL

Title: D ( ) Delete  
Name: LEVINE, MICHAEL S  
Address: 33835 OVERTON DR  
City-St-Zip: LEESBUKRG, FL

Title: D (X) Change ( ) Addition  
Name: LEVINE, MICHAEL S  
Address: 33835 OVERTON DR  
City-St-Zip: LEESBUKRG, FL

Title: DV ( ) Delete  
Name: SCHMID, DANNY A  
Address: 1341 GRIFFIN ROAD  
City-St-Zip: LEESBURG, FL 34748

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DP ( ) Delete  
Name: KILLINGSWORTH, MICHAEL  
Address: 903 AVENIDA CENTRAL  
City-St-Zip: THE VILLAGES, FL 32159

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: BROOKS, W. THOMAS  
Address: 206 N 3RD STREET  
City-St-Zip: THE VILLAGES, FL 32159

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VS ( ) Delete  
Name: STOUGH, BETTY J  
Address: 1500 BANDEROUS AVENUE  
City-St-Zip: THE VILLAGES, FL 32159

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: BETTY J STOUGH      SRVP      07/06/2004  
Electronic Signature of Signing Officer or Director      Date