

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V42919

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: PIONEER BANKCORP, INC.

## Current Principal Place of Business:

300 EAST SUGARLAND HIGHWAY  
CLEWISTON, FL 33440

## New Principal Place of Business:

## Current Mailing Address:

300 EAST SUGARLAND HIGHWAY  
CLEWISTON, FL 33440

## New Mailing Address:

PO BOX 1237  
CLEWISTON, FL 33440

FEI Number: 65-0932870

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COUSE, MILLER  
300 EAST SUGARLAND HIGHWAY  
CLEWISTON, FL 33440 US

## Name and Address of New Registered Agent:

COUSE, MILLER  
300 EAST SUGARLAND HIGHWAY  
CLEWISTON, FL 33440 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: MILLER COUSE

04/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: COUSE, MILLER  
Address: 227 EAST CRESCENT DRIVE  
City-St-Zip: CLEWISTON, FL

Title: D ( ) Delete  
Name: EDWARDS, EARL E III  
Address: 325 E. DEL MONTE  
City-St-Zip: CLEWISTON, FL 33440

Title: D ( ) Delete  
Name: BEER, BRYAN  
Address: 1021 N RIVER RD  
City-St-Zip: LABELLE, FL 33935

Title: D ( ) Delete  
Name: LARSEN, KARL E  
Address: PO BOX 1266  
City-St-Zip: CLEWISTON, FL 33440

Title: D ( ) Delete  
Name: RIDGDILL, MORRIS  
Address: PO BOX 447  
City-St-Zip: CLEWISTON, FL 33440

Title: S ( ) Delete  
Name: WOOD, RANDALL N  
Address: 282 CR 720  
City-St-Zip: CLEWISTON, FL 33440

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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 Chapter 119, 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: RANDALL N WOOD

S

04/24/2007

Electronic Signature of Signing Officer or Director

Date