

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 011537

Entity Name: FIRST BANK**Current Principal Place of Business:**300 E. SUGARLAND HIGHWAY
CLEWISTON, FL 33440**Current Mailing Address:**300 E. SUGARLAND HIGHWAY
CLEWISTON, FL 33440**FEI Number:** 59-0242465**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WOOD, RANDALL N
300 E. 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:** RANDALL N WOOD

04/11/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name PERRY, THOMAS CJR
Address P O BOX 145
City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR
Name HIGGINBOTHAM, ANDREW
Address PO BOX 1466
City-State-Zip: LABELLE FL 33975

Title CHAIRMAN
Name COUSE, MILLER
Address 227 W. CRESCENT AVENUE
City-State-Zip: CLEWISTON FL

Title DIRECTOR
Name BEER, BRYAN
Address 1021 N RIVER RD
City-State-Zip: LABELLE FL 33935

Title SVPST
Name WOOD, RANDALL N
Address 282 CR 720
City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR
Name EDWARDS, EARL E111
Address 325 E DEL MONTE AVE
City-State-Zip: CLEWISTON FL 33440

Title PRESIDENT, CEO
Name SOUD, CAREY
Address 161 RIVERBEND DR
City-State-Zip: LABELLE FL 33935

Title DIRECTOR
Name LARSEN, KARL E
Address PO BOX 1266
City-State-Zip: CLEWISTON FL 33440

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I hereby 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 all other like empowered.

SIGNATURE: RANDALL N WOOD

SVPST

04/11/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WEISINGER, MAX JAIME
Address 7262 HEAVEN LN
City-State-Zip: FT MYERS FL 33908

Title DIRECTOR
Name HILLIARD CARROLL, MARY E
Address 10 PLUM BRANCH RD
City-State-Zip: EDGEFIELD SC 29824