

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 209089

**FILED**  
**Mar 22, 2017**  
**Secretary of State**  
**CC7484326275**

**Entity Name:** CITIZENS STATE BANK

**Current Principal Place of Business:**

2000 S BYRON BUTLER PKWY  
PERRY, FL 32348

**Current Mailing Address:**

PO BOX 143060  
GAINESVILLE, FL 32614 US

**FEI Number:** 59-0828474

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LEVY, GILBERT A  
13840 W. NEWBERRY RD.  
NEWBERRY, FL 32669 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:** GILBERT A. LEVY

03/22/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SEC, VP, CONTROLLER  
Name PACK, NICOLLE R  
Address 13840 W. NEWBERRY RD.  
City-State-Zip: NEWBERRY FL 32669

Title PRESIDENT, CEO, DIRECTOR  
Name LEVY, GILBERT  
Address 13840 W. NEWBERRY RD.  
City-State-Zip: NEWBERRY FL 32669

Title CBD  
Name DICKERT, MARK  
Address 13840 W. NEWBERRY RD.  
City-State-Zip: NEWBERRY FL 32669

Title COO  
Name CRUM, BRIAN  
Address 13840 W. NEWBERRY RD.  
City-State-Zip: NEWBERRY FL 32669

Title CFO  
Name ROBINSON, B BRYAN  
Address 13840 W. NEWBERRY ROAD  
City-State-Zip: NEWBERRY FL 32669

*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:** NICOLLE PACK

VP/CONTROLLER

03/22/2017

Electronic Signature of Signing Officer/Director Detail

Date