

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000089740

Entity Name: PNB COMMUNITY BANK, INC.**Current Principal Place of Business:**1020 JOHN SIMS PKWY E
NICEVILLE, FL 32578**Current Mailing Address:**P.O. BOX 517
NICEVILLE, FL 32588 US**FEI Number:** 59-2648364**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
P O BOX 6200(32314-6200)
200 E GAINSES STREET
TALLAHASSEE, FL 32399-0000 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D
Name	DYE, DEBORAH P
Address	128 TAMARA COVE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	POWELL, JAMES W
Address	642 SAILBOAT DRIVE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	FLOYD, MICHAEL R
Address	109 MULRY DRIVE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	GANN, BILLY L
Address	904 KRISTANNA DRIVE
City-State-Zip:	PANAMA CITY FL 32405

Title	D
Name	HARRISON, CYNTHIA M
Address	376 WATERVIEW COVE DRIVE
City-State-Zip:	FREEPORT FL 32439

Title	D
Name	LAFLIN, CASEE L
Address	67 N MOSSY CREEK ROAD
City-State-Zip:	DEFUNIAK SPRINGS FL 32433

Title	D
Name	SPENCE, FREIDA L
Address	810 SPENCE CIR.
City-State-Zip:	NICEVILLE FL 32578

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: DEBORAH P DYE**DIRECTOR****04/16/2021**

Electronic Signature of Signing Officer/Director Detail

Date