2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000001498

Entity Name: THE FIRST PORT CITY BANK

Current Principal Place of Business:

400 WEST SHOTWELL STREET BAINBRIDGE. GA 39819

Current Mailing Address:

P O BOX 1070

BAINBRIDGE, GA 39818 US

FEI Number: 58-1178459 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

FILED Feb 23, 2024

Secretary of State

7948831746CC

Officer/Director Detail:

Title PCEO Title EVP

Name EWING, SCOTT Name JERNIGAN, NANCY

Address 400 WEST SHOTWELL STREET Address 400 WEST SHOTWELL STREET

City-State-Zip: BAINBRIDGE GA 39818 City-State-Zip: BAINBRIDGE GA 39818

Title EVP Title CFO

Name CHILDERS, DURAND Name CARROLL, MARVALYNN W

Address 400 WEST SHOTWELL STREET Address 400 WEST SHOTWELL STREET

City-State-Zip: BAINBRIDGE GA 39818 City-State-Zip: BAINBRIDGE GA 39818

Title AVPS Title AVPS

Name WARREN, STACY AVP/SECRETARY Name KENNEDY, TAYLOR B

Address P O BOX 1070 Address 400 WEST SHOTWELL STREET

400 WEST SHOTWELL STREET City-State-Zip: BAINBRIDGE GA 39818

City-State-Zip: BAINBRIDGE GA 39818

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: MARVALYNN CARROLL

EVP/CFO

02/23/2024