

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

1430093

OMB Approval	
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Hours per response	1

PROCESSED
MAR 25 2008
THOMSON
FINANCIAL

**NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION**

SEC USE ONLY	
Serial	1
DATE RECEIVED	1

Mail Processing Section
Mar 14 2008
Washington, DC 20549

Name of Offering (check if this is an amendment and name has changed, and indicate change.)
Silverton Financial Services, Inc.

Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE

Type of Filing: New Filing Amendment

A. BASIC IDENTIFICATION DATA

I. Enter the information requested about the issuer

Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
Silverton Financial Services, Inc.

Address of Executive Offices (Number and Street, City, State, Zip Code) 3284 Northside Parkway, Atlanta, GA 30327	Telephone Number 770-805-2000
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number



Brief Description of Business
Correspondent Bank

Type of Business Organization

<input type="checkbox"/> corporation	<input type="checkbox"/> limited partnership, already formed	<input checked="" type="checkbox"/> other (please specify): National Banking Association
<input type="checkbox"/> business trust	<input type="checkbox"/> limited partnership, to be formed	

Actual or Estimated Date of Incorporation or Organization: Month **11** Year **1985** Actual Estimated

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State; CN for Canada, FN for other foreign jurisdiction) **_GA_**

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general managing partner of partnership issuers.

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Please see attached list of directors and officers

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

No shareholders own more than 5% of voting stock

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

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Full Name (Last name first, if individual)

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Full Name (Last name first, if individual)

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Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

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Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

B. INFORMATION ABOUT OFFERING

1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?..... Yes No

Answer also in Appendix, Column 2, if filing under ULOE

2. What is the minimum investment that will be accepted from any individual? \$310,156.00

3. Does the offering permit joint ownership of a single unit?..... Yes No

4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
(Check "All States" or check individual States) All States

- | | | | | | | | | | | | | |
|------|------|------|------|------|------|------|------|------|------|------|------|------|
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [MT] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] |

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
(Check "All States" or check individual States) All States

- | | | | | | | | | | | | | |
|------|------|------|------|------|------|------|------|------|------|------|------|------|
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [MT] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] |

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
(Check "All States" or check individual States) All States

- | | | | | | | | | | | | | |
|------|------|------|------|------|------|------|------|------|------|------|------|------|
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [MT] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ _____	\$ _____
Equity.....	\$14,509,097.68	\$14,509,097.68
<input checked="" type="checkbox"/> Common <input type="checkbox"/> Preferred		
Convertible Securities (including warrants)	\$ _____	\$ _____
Partnership Interests.....	\$ _____	\$ _____
Other (Specify) _____	\$ _____	\$ _____
Total.....	\$14,509,097.68	\$14,509,097.68

Answer also in Appendix, Column 3, if filing under ULOE

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount Of Purchases
Accredited Investors	<u>34</u>	\$14,509,097.68
Non-accredited Investors	_____	\$ _____
Total (for filings under rule 504 only)	_____	\$ _____

Answer also in Appendix, Column 4, if filing under ULOE

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dollar Amount Sold
Rule 505.....	_____	\$ _____
Regulation A.....	_____	\$ _____
Rule 504.....	_____	\$ _____
Total.....	_____	\$ _____

4.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	<input type="checkbox"/>	\$ _____
Printing and Engraving Costs	<input type="checkbox"/>	\$ _____
Legal Fees.....	<input checked="" type="checkbox"/>	\$5,000.00
Accounting Fees	<input type="checkbox"/>	\$ _____
Engineering Fees	<input type="checkbox"/>	\$ _____
Sales Commissions (Specify finder's fees separately).....	<input type="checkbox"/>	\$ _____
Other Expenses (identify)	<input type="checkbox"/>	\$ _____
Total.....	<input type="checkbox"/>	\$ _____

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

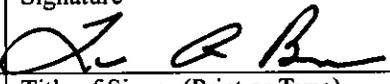
b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the “adjusted gross proceeds to the issuer.” \$14,504,097.68

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.

		Payments to Officers, Directors & Affiliates	Payments to Others
Salaries and fees	<input type="checkbox"/>	\$ _____	\$ _____
Purchase of real estate	<input type="checkbox"/>	\$ _____	\$ _____
Purchase, rental or leasing and installation of machinery and equipment	<input type="checkbox"/>	\$ _____	\$ _____
Construction or leasing of plant buildings and facilities	<input type="checkbox"/>	\$ _____	\$ _____
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	<input type="checkbox"/>	\$ _____	\$ _____
Repayment of indebtedness	<input type="checkbox"/>	\$ _____	\$ _____
Working capital	<input type="checkbox"/>	\$ _____	<input checked="" type="checkbox"/> <u>\$14,504,097.68</u>
Other _____			
_____	<input type="checkbox"/>	\$ _____	\$ _____
Column Totals	<input type="checkbox"/>	\$ _____	<input checked="" type="checkbox"/> <u>\$14,504,097.68</u>
Total Payments Listed (column totals added)			<input checked="" type="checkbox"/> <u>\$14,504,097.68</u>

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b) (2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Silverton Financial Services, Inc.		3-13-08
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Tom A. Bryan	President/CEO	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

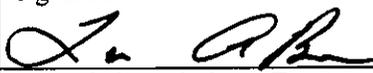
E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule? Yes No

See Appendix, Column 5, for state response.

2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Silverton Financial Services, Inc.	Signature 	Date 3-13-08
Name of Signer (Print or Type) Tom A. Bryan	Title of Signer (Print or Type) President/CEO	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1 State	2 Intend to Sell to Non-accredited Investors in State (Part B-Item 1)		3 Type of security And aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
	Yes	No		Number of Accredited Investors	Amount	Number of Non-accredited Investors	Amount	Yes	No
AL		X	Common Stock, \$14,509,097.68	6	\$2,481,248.00	-	-		X
AK									
AZ									
AR									
CA									
CO									
CT									
DE									
DC									
FL		X	Common Stock, \$14,509,097.68	3	\$3,498,559.68	-	-		X
GA		X	Common Stock, \$14,509,097.68	6	\$2,946,482.00	-	-		X
HI									
ID									
IL									
IN									
IA									
KS									
KY		X	Common Stock, \$14,509,097.68	1	\$310,156.00	-	-		X
LA									
ME									
MD		X	Common Stock, \$14,509,097.68	1	\$310,156.00	-	-		X
MA									
MI									
MN									
MS									

APPENDIX

1 State	2 Intend to Sell to Non-accredited Investors in State (Part B-Item 1)		3 Type of security And aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State UOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
	Yes	No		Number of Accredited Investors	Amount	Number of Non- accredited Investors	Amount	Yes	No
MO									
MT									
NE									
NV									
NH									
NJ									
NM									
NY									
NC		X	Common Stock, \$14,509,097.68	2	\$465,234.00	-	-		X
ND									
OH									
OK									
OR									
PA									
RI									
SC		X	Common Stock, \$14,509,097.68	1	\$155,078.00	-	-		X
SD									
TN		X	Common Stock, \$14,509,097.68	13	\$4,342,184.00	-	-		X
TX									
UT									
VT									
VA									
WA									
WV									
WI									
WY									
PR									

Silverton Bank, N.A./Silverton Financial Services, Inc.
2008-2009 Board of Directors

Chairman: Carlton

Vice Chairman: Price

Executive Committee:

PAUL T. BENNETT
President
South Banking Company
PO Box 1988, 31510
501 West 12th St., 31510
Alma, GA (Bacon)
Spouse: Holly
Ph: 912-632-8631
Fax: 912-632-5780
Cell: 912-614-3631
Asst-Melanie Music
melanie@almaexchangebank.com

TOM A. BRYAN
President/CEO
Silverton Bank, N.A.
3284 Northside Drive NW
Atlanta, GA 30339 (Fulton)
Spouse: Jean Ellen
Ph: 800-277-2265
Fax: 770-805-2164
Cell: 770-329-0950
Email: tbryan@silvertonbank.com
Asst-Ellen Cole 770-805-2221
ecole@silvertonbank.com

MICHAEL CARLTON (Mike)
President/CEO
Crescent State Bank
PO Box 5809, 27512
1005 High House Road, 27513
Cary, NC (Wake)
Spouse: Kim
Ph: 919-462-9783
Fax: 919-460-2528
Cell: 919-210-7155
Email: mcarlton@crescentstatebank.com
Asst-Lana Barnwell
lbarnwell@crescentstatebank.com

W. ROGER CROOK
President/CEO
Bank of Walterboro
PO Box 1707, 29488
1100 N. Jefferies Blvd. 29488
Walterboro, SC (Colleton)
Spouse: Mary Esther
Ph: 843-549-2265
Fax: 843-549-5476
Cell: 843-893-8937
Asst-Lynn Murdaugh
lmurdaugh@bankofwalterboro.com

J. MICHAEL ELLENBURG (Mike)
President/CEO
First Southern State Bank
PO Box 548, 35772-0548
80 Bank St., 35772-9730
Stevenson, AL (Jackson)
Spouse: Kathy
Ph: 256-437-2171
Fax: 256-437-9332
Cell: 256-599-4910
Email: ellenburg@fssbank.com
Asst-Stacey Crabtree
crabtree@fssbank.com

BRIAN R. FOSTER
President/CEO
First Chatham Bank
PO Box 11167, 31412
111 Barnard Street, 31401
Savannah, GA (Chatham)
Spouse: Lynn
Ph: 912-629-2900
DL: 912-629-2907
Fax: 912-629-2915
Cell: 912-247-2586
Email: bfoster@firstchatham.com
Asst-Dottie Rhodes
drhodes@firstchatham.com

CHARLES F. HARPER (Charlie)
Chairman/President
The Commercial Bank of Ozark
PO Box 1029, 36361-1029
208 South Merrick Avenue, 36360
Ozark, AL (Dale)
Spouse: Clementine (Tina)
Ph: 334-774-4931
Fax: 334-774-1309
Cell: 334-618-3497
Email: CFHarper@cbozark.com
Asst-Joanna Williams
jwilliams@cbozark.com

CHRISTOPHER B. MADDIX (Chris)
President/CEO
The Peoples Bank
PO Drawer 788, 30680-0788
71 N. Broad St., 30680
Winder, GA (Barrow)
Spouse: Kim
Ph: 770-867-9111 x1480
Fax: 770-586-5425
Cell: 770-601-9103
Email: cmaddox@tpbonline.com
Asst-Kelly Holliday 678-425-6706
kholliday@tpbonline.com

RONALD F. MILLER
President/CEO
Summit Community Bank
PO Box 3550, 22604
100 West Jubal Early Street., 22601
Winchester, VA (Frederick)
Spouse: Sandy
Ph: 540-678-0300
Fax: 540-722-9150
Cell: 540-533-0277
Email: rmiller@summitfgi.com
Asst-Dawn Frye
dfrye@summitfgi.com

J. EDWARD NORRIS (Ed)
President/CEO
Plantation Federal Bank
P.O. Box 3848, 29585
11039 Ocean Hwy, 29585-3848
Pawleys Island, SC (Georgetown)
Spouse: Mary Lu
Ph: 843-237-3404
Fax: 843-235-8458
Cell: 843-995-2674
Email: j.norrisiii@att.net
Asst-Nathalie O'Reilly
noreilly@plantationfederal.com

JAMES J. PENLAND
Chairman/CEO
First Vision Bank
PO Box 70, 37388
113 West Ogee Street, 37388
Tullahoma, TN (Coffee)
Spouse: Nita
Ph: 931-454-0500
Fax: 931-454-0523
Cell: 931-703-0450
Email: jpenland@firstvisionbank.com
Asst-Susan Parker
sparker@firstvisionbank.com

STEPHEN L. PRICE (Steve)
Chairman/President/CEO
Florida Community Bank
1400 North 15th Street
Immokalee, FL 34142 (Collier)
Spouse: Janet
Ph: 239-657-3171
Fax: 239-657-8482
Cell: 239-229-0309
Email: sprice@floridacommunitybank.net
Asst-Maricela Nunez
mnunez@floridacommunitybank.net

BOBBY SHEPARD
President/CEO
PlantersFIRST
PO Box 879, 31010
910 South Greer Street
Cordele, GA 31015 (Crisp)
Spouse: Roslyn
Ph: 229-273-7415
Fax: 229-273-0483
Email: bshepard@plantersfirst.com
Asst-Beverly Altman 229-273-7943
baltman@plantersfirst.com

R. RONALD SWANNER (Ron)
President/CEO
Home Savings Bank
PO Box 489, 28002-0489
155 West South Street, 28001
Albemarle, NC (Stanly)
Spouse: Beth
Ph: 704-982-9184
Fax: 704-983-1308
Cell: 704-984-1410
Email: rswanner@southstreetfinancial.com
Asst-Janice Smith
jsmith@southstreetfinancial.com

END