

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morahan
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 22 1996 8:00 am
Secretary of State

DOCUMENT # 003878 (6)

1. Corporation Name
QUINCY STATE BANK



Principal Place of Business Mailing Address
**4 E. WASHINGTON ST.
DRAWER 700
QUINCY FL 32351**

3. Date Incorporated or Qualified **08/20/1889** 3a. Date of Last Report **04/20/1995**
4. FEI Number **59-0413850** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

**BRANSON, W C "BUD"
4 EAST WASHINGTON ST
QUINCY FL 32351**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent Signature (press system response))

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANSON, W.C.	1.2 NAME	
STREET ADDRESS	RT 3 BOX 2620	1.3 STREET ADDRESS	
CITY-ST-ZIP	QUINCY FL	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CURRY, JOHN SHAW	2.2 NAME	
STREET ADDRESS	331 NORTH MONROE ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	QUINCY FL	2.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BREEDEN, JACK	3.2 NAME	
STREET ADDRESS	RT. 2, BOX 155	3.3 STREET ADDRESS	
CITY-ST-ZIP	QUINCY FL	3.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CUMBIE, NESTA G.	4.2 NAME	
STREET ADDRESS	LAKE YVETTE	4.3 STREET ADDRESS	
CITY-ST-ZIP	HAVANA FL	4.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUDE, GEORGE T	5.2 NAME	
STREET ADDRESS	701 FIRST ST NE	5.3 STREET ADDRESS	
CITY-ST-ZIP	HAVANA FL	5.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHARPTON, RANDALL	6.2 NAME	
STREET ADDRESS	RT. 3, BOX 1911	6.3 STREET ADDRESS	
CITY-ST-ZIP	QUINCY FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Randall Sharpton*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RANDALL SHARPTON

SR. VICE PRESIDENT & CASHIER

01/17/96
Date

904/875-1000
Telephone Number

CR2E034 (12/95)

003878 282



The Quincy State Bank

FLORIDA'S FIRST STATE CHARTERED BANK / MEMBER F.D.I.C.

POST OFFICE BOX 700 · QUINCY, FLORIDA · 32351-0700
PHONE: (904) 876-1000

ADDITIONAL OFFICERS AND DIRECTORS OF THE QUINCY STATE BANK AS OF 12/31/95

TITLE	NAME	STREET ADDRESS	CITY AND STATE
V	Edna Brown	Rt. 1 Box 58-A	Hosford, FL
TOO	Jeanie Holland	1513 Sumter Street	Quincy, FL
V	Hersholt Johnson	Rt. 3 Box 1913	Quincy, FL
V	Almeta E. Leverett	Rt. 6 Box 48	Quincy, FL
V	Linda M. Ongley	4223 Woodbridge Road	Tallahassee, FL
V	Bruce C. Rowan	4 East Washington Street	Quincy, FL
V	Jerald D. Smith	924 Bellamy Drive	Quincy, FL
V	Brenda Sunday	Rt. 1 Box 1978	Chattahoochee, FL
V	Sherry D. Tucker	1126 Pine Avenue	Quincy, FL
V	David Watson	Rt. 2 Box 251-A	Quincy, FL
D	Mark W. Bates	435 N. Jackson Street	Quincy, FL
D	E. Hentz Fletcher Jr.	600 N. 14th Street	Quincy, FL
C/D	John B. Higdon Jr.	202 N. Calhoun Street	Quincy, FL
D	E.W. Hinson Jr.	331 N. 14th Street	Quincy, FL
D	William M. Maxwell	Rt. 7 Box 5700	Quincy, FL
D	Bruce H. Thomas	412 N. Jackson Street	Quincy, FL
D	Pat M. Woodward	Rt. 2 Box 190	Quincy, FL