

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 567703 (4)

1. Corporation Name

FLORIDA BANCORPORATION, INC.



Principal Place of Business

1026 FLORIDA AVE
P.O. BOX 1080
PALM HARBOR FL 34682-1080
US

Mailing Address

1026 FLORIDA AVE
P.O. BOX 1080
PALM HARBOR FL 34682-1080
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

BATT, HOWARD C
611 DRUID RD E SUITE 712
CLEARWATER FL 34616

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 if not applicable

DATE Registered Agent's term expires (if not applicable)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
D	DOCTOR, JOSEPH B, DO	384 COTTONWOOD COURT	FAIRBORN OH	☐
D	POSEVITZ, LASZLO, DO	1220 RUNNYMEDE	DAYTON OH	☐
PST	KOHLER, ROBERT L	2456 APPALOOSA TRAIL	PALM HARBOR FL	☐
D	GOLDBERG, DAVID	7131 WHITE WATER CT	DAYTON OH	☐
D	OHLMANN, WALTER	3112 WINTERHAVEN	DAYTON OH	☐
D	STAH, HAROLD	5459 FOLKSTONE DR	CENTERVILLE OH	☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE	Change	Addition
11	12	13	14	☐	☐	☐
21	22	23	24	☐	☐	☐
31	32	33	34	☐	☐	☐
41	42	43	44	☐	☐	☐
51	52	53	54	☐	☐	☐
61	62	63	64	☐	☐	☐

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12/4/96

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)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A-2296

813-781-6814

CR2E034 (12/95)