

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

APPROVED  
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98 APR -6 AM 11:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION  
ANNUAL REPORT  
1998

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

DOCUMENT # G75579 (4)  
1. Corporation Name  
CAPITAL CITY BANK

Principal Place of Business  
217 NORTH MONROE STREET  
TALLAHASSEE FL 32301-7619  
US

Mailing Address  
217 NORTH MONROE STREET  
TALLAHASSEE FL 32301-7619  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/21/1983	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3277398	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent J. Kimbrough Davis 217 North Monroe Street Tallahassee, FL 32301				10. Name and Address of New Registered Agent	
81 Name					
82 Street Address (P.O. Box Number is Not Acceptable)					
83					
84 City				85 Zip Code	FL

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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D AUSLEY, DUBOSE ESQ 227 SOUTH CALHOUN STREET TALLAHASSEE FL 32301	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	See Attached List.
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	PD BARRON, THOMAS A 217 NORTH MONROE STREET TALLAHASSEE FL 32301	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	CFOS DAVIS, J KIMBROUGH 217 NORTH MONROE STREET TALLAHASSEE FL 32301	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	VCD SMITH, GODFREY 217 NORTH MONROE STREET TALLAHASSEE FL 32301	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	VD SMITH, J. VEREEN JR 217 NORTH MONROE STREET TALLAHASSEE FL 32301	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	CD SMITH, WILLIAM G 217 NORTH MONROE STREET TALLAHASSEE FL 32301	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CR2E034 (10/97)

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Capital City Bank  
Directors' Addresses

INTEROFFICE

- Mr. DuBose Ausley } 227 S. Calhoun Street  
Ausley & McMullen } Tallahassee, FL 32301
- PD Mr. Thomas A. Barron, President  
Capital City Bank 217 N. Monroe Street  
~~P. O. Box 900 N/A~~  
Tallahassee, FL 32302 32301
- Mr. Gregory V. Beauchamp  
Post Office Box 1129 N/A  
Chiefland, Florida 32626-1129
- Mr. Robert J. Beauchamp  
Beauchamp & Edwards CPA  
Post Office Box 1777 N/A  
Chiefland, Florida 32644
- Mr. Donald T. Bennink  
Route 1 Box 98  
Bell, Florida 32619-9715
- Mr. E. Cantey Higdon  
Post Office Box 996 N/A  
Quincy, Florida 32351
- Mr. Harold M. Knowles  
Knowles & Randolph  
528 East Park Avenue  
Tallahassee, Florida 32301
- Mr. R. Gary Landrum  
Landrum-Yaeger & Associates, Inc.  
3375-B Capital Circle, N.E.  
Tallahassee, Florida 32308
- Mr. Blucher B. Lines  
Lines, Hinson & Lines  
Post Office Box 550 N/A  
Quincy, Florida 32353
- Mr. S. Craig McMillan  
Post Office Box 1919 N/A  
Quincy, Florida 32353
- Mr. Payne H. Midyette, Jr.  
Midyette-Moor, a division of  
Palmer & Cay/Carswell, Inc.  
Post Office Box 749 N/A  
Tallahassee, Florida 32302
- Mr. John B. Mowell  
Post Office Box 4168 N/A  
Tallahassee, Florida 32315
- Mr. Reese Rowland  
2030 S W 100th Street  
Trenton, Florida 32693
- Mr. Godfrey Smith  
Vice Chairman 217 N. Monroe Street  
Capital City Bank  
~~Post Office Box 900 N/A~~  
Tallahassee, Florida 32302-32301
- CO Mr. William G. Smith, Jr.  
Chairman  
Capital City Bank  
~~Post Office Box 900 N/A~~ 217 N. Monroe Street  
Tallahassee, Florida 32302 32301
- Mr. Fred M. Williams, Jr.  
Route 3 Box 96-C  
Monticello, Florida 32344
- Mr. P. Graves Williams  
Post Office Box 1018 N/A  
Quincy, Florida 32353