

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G75579

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: CAPITAL CITY BANK

Current Principal Place of Business:

217 NORTH MONROE STREET
TALLAHASSEE, FL 323017619 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 11248
C/O J. KIMBROUGH DAVIS
TALLAHASSEE, FL 323023248 US

New Mailing Address:

FEI Number: 59-3277398 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAVIS, J. KIMBROUGH
217 NORTH MONROE STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARRON, THOMAS A
Address: POST OFFICE BOX 900 N/A
City-St-Zip: TALLAHASSEE, FL 32302

Title: STD () Delete
Name: DAVIS, J KIMBROUGH
Address: POST OFFICE BOX 900 N/A
City-St-Zip: TALLAHASSEE, FL 32302

Title: CD () Delete
Name: SMITH, WILLIAM G JR
Address: POST OFFICE BOX 900 N/A
City-St-Zip: TALLAHASSEE, FL 32302

Title: EVPD () Delete
Name: BRILEY, RANDOLPH H.
Address: POST OFFICE BOX 900 N/A
City-St-Zip: TALLAHASSEE, FL 32302

Title: EVPD () Delete
Name: ENGLERT, MITCHELL R.
Address: POST OFFICE BOX 900 N/A
City-St-Zip: TALLAHASSEE, FL 32302

Title: EVD () Delete
Name: BROWN, G. MATTHEW
Address: POST OFFICE BOX 900 N/A
City-St-Zip: TALLAHASSEE, FL 32302

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: EVPD (X) Change () Addition
Name: ANDREWS, ANDY
Address: 410 WEST 10TH STREET
City-St-Zip: WEST POINT, GA 31833

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: J KIMBROUGH DAVIS

STD

04/30/2002

Electronic Signature of Signing Officer or Director

_____ Date

GRAVES WILLIAMS
POST OFFICE BOX 1018
QUINCY, FL 32353

FRED M. WILLIAMS, JR., DIRECTOR
1000 BETH PAGE ROAD
MONTICELLO, FL 32344

BEN H. WILKINSON, JR., DIRECTOR
POST OFFICE BOX 4288
TALLAHASSEE, FL 32315

JOHN B. MOWELL, DIRECTOR
407 EAST 6TH AVENUE
TALLAHASSEE, FL 32303

S. CRAIG MCMILLAN, DIRECTOR
POST OFFICE BOX 1919
QUINCY, FL 32353

DANIEL M. AUSLEY, DIRECTOR
2808 REMINGTON GREEN CIRCLE
TALLAHASSEE, FL 32308

BLUCHER B. LINES, DIRECTOR
POST OFFICE BOX 550
QUINCY, FL 32353

R. GARY LANDRUM, DIRECTOR
3375-B CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

HAROLD M. KNOWLES, DIRECTOR
215 SOUTH MONROE, SUITE 130
TALLAHASSEE, FL 32301

E. CANTEY HIGDON, DIRECTOR
POST OFFICE BOX 977
QUINCY, FL 32353

KENNETH R. HART, DIRECTOR
227 SOUTH CALHOUN STREET
TALLAHASSEE, FL 32301

DONALD T. BENNINK, DIRECTOR
2740 CRW 232
BELL, FL 32619

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CHIEFLAND, FL 32644

GREGORY V. BEAUCHAMP, DIRECTOR
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TALLAHASSEE, FL 32301

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102 SOUTH MAIN STREET
HAVANA, FL 32333

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420 NORTH BROAD STREET
CAIRO, GA 31728

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TALLAHASSEE, FL 32308

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MONTICELLO, FL 32344

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WEST POINT, GA 31833

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TALLAHASSEE, FL 32303

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217 NORTH MONROE STREET
TALLAHASSEE, FL 32301

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1301 METROPOLITAN BOULEVARD
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