

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G75579

FILED
Feb 07, 2012
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:

217 NORTH MONROE STREET
TALLAHASSEE, FL 323017619 US

New Mailing Address:

FEI Number: 59-3277398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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

OFFICERS AND DIRECTORS:

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

Title: ST
Name: DAVIS, J. KIMBROUGH
Address: POST OFFICE BOX 900 N/A
City-St-Zip: TALLAHASSEE, FL 32302

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

Title: VPD
Name: CANUP, EDWARD G
Address: POST OFFICE BOX 900 N/A
City-St-Zip: TALLAHASSEE, FL 32302

Title: VPD
Name: ENGLERT, MITCHELL R
Address: POST OFFICE BOX 900 N/A
City-St-Zip: TALLAHASSEE, FL 32302

Title: VPD
Name: COLLEDGE, WILLIAM D
Address: POST OFFICE BOX 900 N/A
City-St-Zip: TALLAHASSEE, FL 32302

I hereby 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 all other like empowered.

SIGNATURE: J. KIMBROUGH DAVIS

CFO

02/07/2012

Electronic Signature of Signing Officer or Director

Date