2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2002 8:00 AM
Secretary of State

DOCUMENT# J83024

Entity Name: THE TERRACE BANK OF FLORIDA

Current Principal Place of Business:

5140 EAST FOWLER AVENUE
P.O. BOX 16828, TEMPLE TERRACE, 33687
TAMPA, FL 336876828 US

New Principal Place of Business:

Current Mailing Address:

5140 EAST FOWLER AVENUE
P.O. BOX 16828, TEMPLE TERRACE, 33687
TAMPA, FL 336876828 US

New Mailing Address:

FEI Number: 59-2689717 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PUFFER, JOHN W PRES
5140 E FOWLER AVENUE
TAMPA, FL 33617

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: JOHN W. PUFFER 05/31/2002
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:	D	( ) Delete
Name:	DEWEESE, WILLIAM O	
Address:	4033 PRIORY CIRCLE	
City-St-Zip:	TAMPA, FL	
Title:	V	( ) Delete
Name:	MCCARTHY, JOHN J	
Address:	5110 STONEHURST RD	
City-St-Zip:	TAMPA, FL	
Title:	D	( ) Delete
Name:	PORTER, CHARLES G	
Address:	4901 W HANNA AVE	
City-St-Zip:	TAMPA, FL	
Title:	D	( ) Delete
Name:	MCKEEL, ROSS ANN	
Address:	5140 E FOWLER AVE	
City-St-Zip:	TAMPA, FL	
Title:	D	( ) Delete
Name:	SMITH, DAVID J	
Address:	4810 E BUSCH BLVD SUITE H	
City-St-Zip:	TAMPA, FL	
Title:	V	( ) Delete
Name:	MILLS, BRETT	
Address:	5140 E FOWLER AVE	
City-St-Zip:	TAMPA, FL 33617	

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:	D	(X) Change ( ) Addition
Name:	ROSS, ANN MCKEEL	
Address:	5140 E FOWLER AVE	
City-St-Zip:	TAMPA, FL	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: BRETT MILLS V 05/31/2002
Electronic Signature of Signing Officer or Director Date

PUFFER, JOHN W., CHAIRMAN & PRES.
5140 E FOWLER AVE
TAMPA, FL 33617

GOEHRING, ROLAND, DIRECTOR
5140 E FOWLER AVE
TAMPA, FL 33617

TOMASINO, PAUL, DIRECTOR
5140 E FOWLER AVE
TAMPA, FL 33617

HARVILL, ALAN D., DIRECTOR
5140 E FOWLER AVE
TAMPA, FL 33617