

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

FILED
Jan 20 1998 8:00am
Secretary of State



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

DOCUMENT # L20553 (8)
 1. Corporation Name
MERCANTILE BANK



DO NOT WRITE IN THIS SPACE

Principal Place of Business: **425 - 22ND AVENUE NORTH ST. PETERSBURG FL 33704-4345**
 Mailing Address: **425 - 22ND AVENUE NORTH ST. PETERSBURG FL 33704-4345**

3. Date Incorporated or Qualified: **05/15/1990**
 4. FEI Number: **59-2560767**
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

2. Principal Place of Business
 21. Suite, Apt. #, etc.
 22. City & State
 23. Zip
 24. Country
 25. Mailing Address
 26. Suite, Apt. #, etc.
 27. City & State
 28. Zip
 29. Country
 30.

9. Name and Address of Current Registered Agent

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: _____ DATE: _____
Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE	D	<input type="checkbox"/> DELETE
NAME	HARRIS, THOMAS M.	
STREET ADDRESS	150 2ND AVENUE NO, SUITE 1500	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KONCIUS, ALGIS	
STREET ADDRESS	5725 DRAGON WAY, SUITE 219	
CITY-ST-ZIP	CINCINNATI OH	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ORTIZ, LOUIS P.	
STREET ADDRESS	888 EXEC. CENTER DR. W., SUITE 101	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	RISSE, P. N., III	
STREET ADDRESS	2865 EXECUTIVE CENTER DRIVE	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	CAMPBELL, GORDON W	
STREET ADDRESS	425 22ND AVE. NO.	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	VTS	<input type="checkbox"/> DELETE
NAME	MILLER, BARRY K	
STREET ADDRESS	425 22ND AVENUE NO.	
CITY-ST-ZIP	ST. PETERSBURG FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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.

SIGNATURE: *[Handwritten signatures]*

CR2E034 (10/97)