2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State
05-15-2001 90032 050 ***150.00

DOCUMENT # P97000091697

1. Entity Name
JACKSONVILLE BANCORP, INC,

Principal Place of Business	Mailing Address
76 S. LAURA ST. SUITE 104 JACKSONVILLE FL 32203 US	P.O. BOX 40466 JACKSONVILLE FL 32203 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3472981 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WHALEN, CHERYL L EV/CFO 76 S. LAURA STREET SUITE 104 JACKSONVILLE FL 32202	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____ 4/30/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CARTER, MICHAEL D 2709 SOUTH OCEAN DRIVE JACKSONVILLE BEACH FL 32250-5946	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	"See attachment"	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST WHALEN, CHERYL L 407 ARTHUR MOORE DRIVE GREEN COVE SPRINGS FL 34043	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC MILLS, R.C. 160 PLANTATION CIR SOUTH PONTE VEDRA BEACH FL 32082	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP POMAR, GILBERT J III 4957 ORTEGA BLVD JACKSONVILLE FL 32210	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHULTZ, JOHN R 1823 SEMINOLE RD JACKSONVILLE FL 32205	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHWENCK, PRICE W 6410 KIM ROAD JACKSONVILLE FL 32217	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	8410 Kim Road	☒ Change ☐ Addition

CR2E034 (10/00)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Cheryl L. Whalen Cheryl L. Whalen EVP/CFO 4/30/01 904-421-3040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Document # 974801
P97000091697

2001 UNIFORM BUSINESS REPORT (UBR)
ATTACHMENT DOCUMENT # P97000091697
JACKSONVILLE BANCORP, INC.

OFFICERS AND DIRECTORS

TITLE	D
NAME	Gottlieb, Melvin
STREET ADDRESS	3028 Forest Circle
CITY-ST-ZIP	Jacksonville, Florida 32257-5620

TITLE	D
NAME	Healey, James M.
STREET ADDRESS	2507 South Ocean Drive
CITY-ST-ZIP	Jacksonville Beach, Florida 32250-5942

TITLE	D
NAME	Kowkabany, John C.
STREET ADDRESS	110 Palm Place
CITY-ST-ZIP	Neptune Beach, Florida 32266

TITLE	D
NAME	Kraft, Rudolph A.
STREET ADDRESS	1355 Moss Creek Drive
CITY-ST-ZIP	Jacksonville, Florida 32225

TITLE	D
NAME	Roller, Donald E.
STREET ADDRESS	1421 Ponte Vedra Blvd.
CITY-ST-ZIP	Ponte Vedra Beach, Florida 32082

TITLE	D
NAME	Rose, John W.
STREET ADDRESS	511 Anderwood Drive
CITY-ST-ZIP	Hermitage, PA 16148

TITLE	D
NAME	Spencer, Charles F.
STREET ADDRESS	590 Queens Harbor Blvd.
CITY-ST-ZIP	Jacksonville, Florida 32225

TITLE	D
NAME	Tavar, Bennett A.
STREET ADDRESS	2863 Evercharm Place
CITY-ST-ZIP	Jacksonville, Florida 32257

TITLE	D
NAME	Winfield M.D., Gary L.
STREET ADDRESS	630 Jacksonville Drive
CITY-ST-ZIP	Jacksonville Beach, Florida 32250