

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000014103

1. Entity Name

FLORIDA BANCSHARES INC.

**FILED**  
**Apr 14, 2000 8:00 am**  
**Secretary of State**

04-14-2000 90108 033 \*\*\*150.00

Principal Place of Business

Mailing Address

13315 US HWY 301  
DADE CITY FL 33525

13315 US HWY 301  
DADE CITY FL 33525-5435

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3434888

Applied For

Not Applicable

Zip

Country

Zip

Country

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

ROBERTS, J. LAMAR  
13315 US HWY 301  
DADE CITY FL 33525

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

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, 2000 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 ☐ Delete  
NAME D  
STREET ADDRESS GIBBS, A. P.  
CITY-ST-ZIP P O BOX 618 N/A  
DADE CITY FL 33526

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME P  
STREET ADDRESS LAMAR, ROBERTS J  
CITY-ST-ZIP 5340 EPPING LANE  
ZEPHYRHILLS FL 33541

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
STREET ADDRESS ANDERSON, DUANE  
CITY-ST-ZIP P O BOX 277 N/A  
DADE CITY FL 33526

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
STREET ADDRESS BLOOM, LEON  
CITY-ST-ZIP 1401 WESTBROOK DR  
SARASOTA FL 34231

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
STREET ADDRESS HENSON, JOHN E  
CITY-ST-ZIP P O BOX 517 N/A  
ZEPHYRHILLS FL 33539

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
STREET ADDRESS MANN, MARLENE H  
CITY-ST-ZIP 39151 WOODLAND DR  
ZEPHYRHILLS FL 33540

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J. Lamar Roberts, President and CEO

April 7, 2000

Date

(352) 521-0141

Daytime Phone #

CR2E034 (9/99)

997000014103

938218

**FLORIDA BANCSHARES, INC.  
ADDITIONAL DIRECTORS AND OFFICERS NOT LISTED ON ANNUAL REPORT  
TO FLORIDA DEPARTMENT OF STATE**

**April 7, 2000**

TITLE:	Director
NAME:	Paul Midili
STREET ADDRESS:	P. O. Box 162
CITY, STATE-ZIP	San Antonio, Florida 33576-0162

TITLE:	Director
NAME:	Marcelino Oliva
STREET ADDRESS:	P. O. Box 1234
CITY, STATE-ZIP	Dade City, Florida 33526-1234

TITLE:	Director
NAME:	Ernest Peeples
STREET ADDRESS:	P. O. Box 1058
CITY, STATE-ZIP	Zephyrhills, Florida 33539-1058

TITLE:	Director
NAME:	Samuel Posey
STREET ADDRESS:	P. O. Box 576
CITY, STATE-ZIP	Dade City, Florida 33526-0576

TITLE:	Director
NAME:	Robert D. Sumner
STREET ADDRESS:	P. O. Box 1047
CITY, STATE-ZIP	Dade City, Florida 33526-1047

TITLE:	Secretary
NAME:	Lori A. Kustes
STREET ADDRESS:	36152 Hillbrook Avenue
CITY, STATE-ZIP	Zephyrhills, Florida 33541

TITLE:	Treasurer
NAME:	Wayne G. Sharp
STREET ADDRESS:	5008 Shirley Circle
CITY, STATE-ZIP	Zephyrhills, Florida 33541