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 270902

2004 FOR PROFIT CORPORATION ANNUAL REPORT

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SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # 270902			
1. Entity Name BANK OF THE SOUTH			
Principal Place of Business 4410 FAIRFIELD DRIVE PENSACOLA, FL 32506 US		Mailing Address P.O. BOX 3229 PENSACOLA, FL 32516 US	
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 59-1050700		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	
TYRRELL, ROSE MARIE 1077 GERHARDT DR PENSACOLA, FL 32503		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD MAIR, DONNA 109 BAYSHORE DRIVE PENSACOLA, FL 32507	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP AVP Nunnally, Nancy 1016 Kearney Drive Pensacola, FL 32505	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D ROSENBLOOM, ALAN 417 CANTERBURY LN GULF BREEZE, FL 32561	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D WOODBURY, WILLIAM P 1061 HARBOURVIEW CIRCLE PENSACOLA, FL 32507	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP AC MACGREGOR, MARY 14710 GREGOR LANE PENSACOLA, FL 32507	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP DEVP TYRRELL, ROSE MARIE 1077 GERHARDT DR PENSACOLA, FL 32503	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VD WOODBURY, CHARLES P. III 4060 BARRANCAS AVE PENSACOLA, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Mary A. MacGregor</i>		1/06/04 850 456 5722	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Mary A. MacGregor, AC		Date Daytime Phone #	