I hereby 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 all other like empowered.

PRESIDENT

SIGNATURE: JAMES R JONES

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 846652

Entity Name: ESCAMBIA COUNTY BANK, INCORPORATED

Current Principal Place of Business:

2151 RINGOLD STREET FLOMATON, AL 36441

Current Mailing Address:

P.O. BOX 601 2151 RINGOLD ST FLOMATION, AL 36411

FEI Number: 63-0068160

Name and Address of Current Registered Agent:

MCCANN II, WILLIAM A 1501 WEST HIGHWAY 4 CENTURY, FL 32535 US

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PC	Title	D
Name	JONES, JAMES R	Name	SCOTT, NETTIE
Address	89 RED MAPLE DR, BOX 594	Address	203 STATELINE ROAD
City-State-Zip:	FLOMATON AL	City-State-Zip:	FLOMATON AL
Title	DVS	Title	DV
Name	MCCUTCHIN, CHARLES J	Name	DEWITT, WALTER A
Address	3859 OLD ATMORE ROAD	Address	222 RED MAPLE DR
City-State-Zip:	FLOMATON AL	City-State-Zip:	FLOMATON AL
Title	V		
Name	HENDRICKS, GEORGE		
Address	3023 HENDRICKS EMMONS ROAD		
City-State-Zip:	BREWTON AL		

02/27/2013

Date

FILED Feb 27, 2013 Secretary of State CC6867055798

Certificate of Status Desired: No

Date