

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 003385

FILED  
Feb 21, 2006  
Secretary of State

Entity Name: FARMERS AND MERCHANTS BANK

## Current Principal Place of Business:

200 E. WASHINGTON STREET  
P.O. BOX 340  
MONTICELLO, FL 323450340 US

## New Principal Place of Business:

## Current Mailing Address:

200 E. WASHINGTON STREET  
P.O. BOX 340  
MONTICELLO, FL 323450340 US

## New Mailing Address:

FEI Number: 59-0238640

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CD ( ) Delete  
Name: CARRAWAY JR, F W,  
Address: 2626 MAHAN DRIVE  
City-St-Zip: TALLAHASSEE, FL

Title: VP ( ) Delete  
Name: SWORDS, SANDY M.  
Address: 120 COOPERS POND RD  
City-St-Zip: MONTICELLO, FL 32344

Title: EVPD ( ) Delete  
Name: SIMS, R MICHAEL,  
Address: 25 TALLAMONT ROAD  
City-St-Zip: MONTICELLO, FL 32344

Title: PD ( ) Delete  
Name: WRIGHT, L G,  
Address: OLD LLOYD ROAD  
City-St-Zip: MONTICELLO, FL 32344

Title: SVP ( ) Delete  
Name: IKNER, JERALD  
Address: BUCK LAKE ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: SVP ( ) Delete  
Name: BOATWRIGHT, JERRY G.  
Address: 287 NASH ROAD  
City-St-Zip: LAMONT, FL 32336

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: R. MICHAEL SIMS

EVPD

02/21/2006

Electronic Signature of Signing Officer or Director

Date