

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **003641** (8)
1. Corporation Name
GADSDEN STATE BANK

Principal Place of Business GADSDEN STATE BANK 124-126 W WASHINGTON ST CHATTAHOOCHEE FL 32324	Mailing Address GADSDEN STATE BANK 124-126 W WASHINGTON ST CHATTAHOOCHEE FL 32324
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 07/27/1907	
25		30		4. FEI Number 59-0258220 Applied For Not Applicable	
9. Name and Address of Current Registered Agent MANOR, JOHN W 4425 LAFAYETTE ST MARIANNA FL 32446		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title of applicant

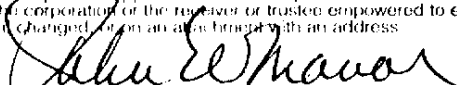
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EUBANKS, PAUL J	12 NAME	
STREET ADDRESS	907 CONCORD ROAD	13 STREET ADDRESS	
CITY - ST - ZIP	TALLAHASSEE FL	14 CITY - ST - ZIP	
TITLE	P	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, STEVE	22 NAME	
STREET ADDRESS	4588 OAKWOOD DRIVE	23 STREET ADDRESS	
CITY - ST - ZIP	MARIANNA FL	24 CITY - ST - ZIP	
TITLE	DC	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MASSEY, LAMAR	32 NAME	
STREET ADDRESS	110 GULF AVE DRIVE	33 STREET ADDRESS	
CITY - ST - ZIP	PORT ST. JOE FL	34 CITY - ST - ZIP	
TITLE	D	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAMSEY, WILL I.	42 NAME	
STREET ADDRESS	620 MORGAN AVE	43 STREET ADDRESS	
CITY - ST - ZIP	CHATTAHOOCHEE FL	44 CITY - ST - ZIP	
TITLE	D	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANOR, JOHN W	52 NAME	
STREET ADDRESS	300 BALES DR	53 STREET ADDRESS	
CITY - ST - ZIP	MARIANNA, FL 00000	54 CITY - ST - ZIP	
TITLE	D	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRADLEY, JOSEPH T.	62 NAME	
STREET ADDRESS	17 W. WASHINGTON ST.	63 STREET ADDRESS	
CITY - ST - ZIP	CHATTAHOOCHEE FL	64 CITY - ST - ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 or changed, or on an address brought with an address.

SIGNATURE:



JOHN W. MANOR

2/13/98

850-663-4054

CR2E034 (10/97)