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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # Corporation Name

(6)

COLUMBIA COUNTY BANK

FILED Jan 30 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 127 W. HILLSBORD ST. PO BOX 1609 LAKE CITY FL 32055 LAKE CITY FL 32056 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/12/1912 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-0201970 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing **\$5.00** May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zìp Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 ▼ Yes Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GREEN, ROBERT L Name 2250 INGLEWOOD DR Street Address (P.O. Box Number is Not Acceptable) LAKE CITY FL 32025 83 City Zip Code Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 11 TITLE ☐ Change Addition PAGE, MARTIN S NAME 12 NAME 228 E DUVAL STREET STREET ADDRESS 1.3 STREET ADDRESS LAKE CITY FL CITY - ST - ZIP 1.4 CITY - ST- ZIP TITLE DELETE 2.1 TITLE Change Addition SUMMERS, GORDON P NAME 2.2 NAME 101 LAKE VISTA LN STREET ADDRESS 2.3 STREET ADDRESS LAKE CITY FL CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NELSON, GENEVIEVE S NAME 3.2 NAME 9 DOUGLAS CIRCLE STREET ADDRESS 3.3 STREET ADDRESS LAKE CITY FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change ___ Addition GREEN, ROBIN C NAME 4, 2 NAME 2250 INGLEWOOD DR STREET ADDRESS 4.3 STREET ADDRESS LAKE CITY FL CITY - ST - ZIP 4.4 CITY-ST-ZIP DVC DELETE TITLE 5.1 TITLE Change Addition GREEN, R L NAME 5.2 NAME 1126 S CHURCH ST STREET ADDRESS 5.3 STREET ADDRESS LAKE CITY FL CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE Спапде Addition 6.1 TITLE RONSONET, NORBIE NAME 6.2 NAME 2371 INGLEWOOD DR STREET ADDRESS 6.3 STREET ADDRESS LAKE CITY FL City - St - ZiP 6.4 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 ecceiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

1/7/97

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