

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 005448

FILED  
Oct 20, 2004  
Secretary of State

Entity Name: COLUMBIA COUNTY BANK

## Current Principal Place of Business:

173 NW HILLSBORO ST  
LAKE CITY, FL 32055 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1609  
LAKE CITY FLA, 32056 US

## New Mailing Address:

PO BOX 1609  
LAKE CITY, FL 320561609 US

FEI Number: 59-0201970

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NAYLOR, BRUCE A  
173 NW HILLSBORO ST  
LAKE CITY, FL 32055 US

## Name and Address of New Registered Agent:

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

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D/V C ( ) Delete  
Name: COLLINS, MICHAEL  
Address: ROUTE 8 BOX 875  
City-St-Zip: LAKE CITY, FL 32055

Title: D/C ( ) Delete  
Name: SUMMERS, GORDON P  
Address: 101 LAKE VISTA LN  
City-St-Zip: LAKE CITY, FL 32055

Title: P/D ( ) Delete  
Name: NAYLOR, BRUCE A  
Address: 377 NW FOREST MEADOWS AVENUE  
City-St-Zip: LAKE CITY, FL 32055

Title: D ( ) Delete  
Name: GREEN, ROBIN C  
Address: 2250 INGLEWOOD DR  
City-St-Zip: LAKE CITY, FL 32055

Title: D ( ) Delete  
Name: GREEN, R L  
Address: 1126 S CHURCH ST  
City-St-Zip: LAKE CITY, FL 32055

Title: D ( ) Delete  
Name: SCAFF, LESTER  
Address: 2200 EAST DUVAL STREET  
City-St-Zip: LAKE CITY, FL 32055

## 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 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 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: LARRY W. SISCO

SVP

10/20/2004

Electronic Signature of Signing Officer or Director

Date