FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #
1. Corporation Name

006766

BARNETT BANK OF WEST FLORIDA

(0)

FILED Jan 31 1996 8:00 am Secretary of State

- F (\$16) (\$10) (\$10) \$10)	BULL BARN BURN	

Principal Place of Business Mailing Address					. 180111 24-11 44114 1114 12616 BIII)!! @ @ !		11811 WIDII (88)	
100 WEST GARDEN STREET PENSACOLA FL 32501		P.O. BOX 1192 PENSACOLA FL 32595 US								
		US				3. Date incorporated or Qualified	3a. Date			
	· · · · ·					05/30/1914	0	13/07/	199	5
	ace of Business	2a. Mailing Address				4. FEt Number		L		oplied For
[21] Suita Act	N oto	26				59-0242470				ot Applicable
Suite Apt	• • • • • • • • • • • • • • • • • • • •	Suite, Apt. #, etc.				5. Certificate of Status Desired		F	ee Re	Additional equired
City & State	•	City & State				6. Election Campaign Financing				May Be
[23] Zip	Country	7ip	Countr			Trust Fund Contribution				to Fees
24	25	29	30	y		This corporation has liability for Florida Statutes The Statutes	intangible ta No	x unae	ırş 1	99.032,
[57]	9. Name and Address of Currer		1301			10. Name and Address of New F		Agent		
<u> </u>			81	Na	эпте					
STILLED	, HARRY A.				7	(O.O. Day Marshard Salah Assault)	1.3		~ 	
!	GARDEN ST		82	St	reet Addres	ss (P.O. Box Number is Not Acceptab	ne)			
1	COLA FL 32501		83	1						
Littore	000112 02001							-11		
			84	Cil	ty		FL	85	Zipi	Code
11. Pursuant t	a the provisions of Sections 607.0502	and 607 1508, Florida Statut	es, the above	name	ed corporal	ion submits this statement for the pur	pose of cha	anging i	its reç	gistered office
or register familiär wit	ed agent, or both, in the State of Flori h, and impept the obligations of, Sect	da: Such change was authori; ion 607.0505, Florida Statute:	zed by the corp s.	xorati	on's board	of directors. I hereby accept the app	ointment as	registe	red a	igent. I am
SIGNATURE										
	the transfer of the content of the c		OTE: Registered Age	nt sign	ature required v		DATE			
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	· - · · · · · · · · · · · · · · · · · ·			
THUE	P	☐ DELETE	1. 1 TITLE				ί	Chan	ge	☐ Addition
NAME	NICKELSEN, ERIC J		1.2 NAME							
SUBERT ADDRESS	100 W. GARDEN STREET		1.3 STREE	T ADDR	RESS					
CHY-SI-7IP	PENSACOLA FL		1.4 C(TY-	ST-7(P	<u>, </u>					
2017	VP	DELETE	2 1 TITLE		j		L	Chan	Qе	Addition
NAME	MAGUIRE, MICHAEL I		2 2 NAME							
STREET ADDRESS	100 W GARDEN ST		2 3 STRFE							
City St-Ziff	PENSACOLA FL	FT OF LCT	2 4 CITY -		·			7 05		CT Agence.
11111	V CTURE MADOV A	☐ DELETE	3 1 TITLE				L	Chan	ge	☐ Addition
NAME DESCRIPTION OF THE PROPERTY OF THE PROPER	STUMP, HARRY A. 100 W GARDEN ST		3 2 NAME		0505					
STREET ADORESS			33 STREE							
CHY-S1-ZIF THLE	PENSACOLA FL VP	DELETE	3.4 CHTY-		·		r	T] Chan		Addition
NAME.	YOUNG, WILLIAM C	Д вести	4.2 NAME				L		Ac	
STREET ADORESS	100 W GARDEN ST			* ***	2000					
	PENSACOLA FL		4.3 STREE							
CHY-S1-ZIP	V V	DELETE	4.4 C/TY- 5 1 TITLE		<u></u>			Chan	nge.	Addition
NAM:	COBLE, FRED J		5 2 NAME					المان و	An.	
STREET ADDRESS	100 W GARDEN ST		5 3 STREE		2000					
CrTY - \$1 - ZrP	PENSACOLA FL		54 CITY-		l l					
110	I LIONOULI I L	DELETE	6 1 TITLE					Chan	iae	Addition
NAM:		<u></u>	62 NAME						•	
SERENT ADDRESS			63 STREE		RESS					
C 1Y+S1+ZiP			64 CITY -							
4 0 0 0 0 0 0 4 10	i e		0.4000	J. F.	- 1					

14. For hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 if Planged, or on an attachment with an address.

SIGNATURE:

SIGNING OFFICER OF DIRECTOR

Daytime Phone #

Date