

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

FILED  
May 05 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 # 011358 (9)  
1. Corporation Name  
VANGUARD BANK & TRUST COMPANY

Principal Place of Business  
23 SOUTH JOHN SIMS PARKWAY  
VALPARAISO FL 32580

Mailing Address  
23 SOUTH JOHN SIMS PARKWAY  
VALPARAISO FL 32580



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/07/1922	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	30	4. FEI Number 59-0491810	Applied For Not Applicable
22 City & State	27	28 City & State	31	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	25 Country	29 Zip	32 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

ROBERTS, M. GARY  
23 JOHN SIMS PARKWAY  
VALPARAISO FL 32580

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. 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	VCD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FARRAR, ROGER L.	1.2 NAME	
STREET ADDRESS	23 JOHN SIMS PARKWAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	VALPARAISO FL	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERTS, M. G	2.2 NAME	
STREET ADDRESS	302 MARY ESTHER BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	MARY ESTHER F	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHESSER, D. M	3.2 NAME	
STREET ADDRESS	1201 EGLIN PARKWAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	SHALIMAR FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, H G	4.2 NAME	
STREET ADDRESS	123 MIRACLE STRIP PKWY SE	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT WALTON BEACH, FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WELCH, WILLIAM A	5.2 NAME	
STREET ADDRESS	4801 ROSEMONT PLACE	5.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL	5.4 CITY-ST-ZIP	
TITLE	CD	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUCKEL, WALTER C.	6.2 NAME	
STREET ADDRESS	222 ROCKWOOD LANE	6.3 STREET ADDRESS	
CITY-ST-ZIP	NICEVILLE FL	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 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 changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*

4/22/98

850 729 5574

CP2E034 (10/97)

**Title: Director**  
**Name: D. Timothy Herndon**  
1753 Osprey Cove  
Niceville FL 32578

**Title: Director**  
**Name: James H. Mathis**  
819 Boulevard of Champions  
Shalimar FL 32579

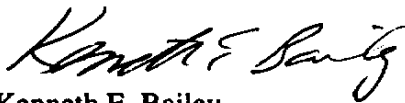
**Title: Director**  
**Name: Clifford H. Long**  
251 Yacht Club Road NE  
Fort Walton Beach FL 32549

**Title: Director**  
**Name: Lowell C. Larson**  
219 Yacht Club Drive  
Fort Walton Beach FL 32548

**Title: Secretary**  
**Name: Kenneth E. Bailey**  
32 Southwind Court  
Niceville FL 32578

One of our directors, Mr. William W. Meigs, passed away on 4/7/97.

Sincerely,

A handwritten signature in black ink, appearing to read "Kenneth E. Bailey". The signature is fluid and cursive, with the first name "Kenneth" being more prominent and the last name "Bailey" following in a similar style.

**Kenneth E. Bailey**  
**Corporate Secretary**