

2001. UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90203 001 ***300.00

DOCUMENT # 012294

1. Entity Name
SOUTHERN EXCHANGE BANK

Principal Place of Business

2028 E. 7TH AVE.
P.O. BOX 5079
TAMPA FL 33605

Mailing Address

2028 E. 7TH AVE.
P.O. BOX 5079
TAMPA FL 33605

2. Principal Place of Business

4401 W Kennedy Blvd.

Suite, Apt. #, etc.

STE 300

City & State
Tampa FL

Zip
33609

Country
USA

3. Mailing Address

c/o Southern Exchange Bank

Suite, Apt. #, etc.

PO BOX 23988

City & State
Tampa FL

Zip
33623

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-0201930**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WESTBROOK, KERRY M
8123 127TH STREET NORTH
SEMINOLE FL 33776

7. Name and Address of New Registered Agent

Name
Westbrook, Kerry M
Street Address (P.O. Box Number is Not Acceptable)
4401 W. Kennedy Blvd.
Ste 300
City Tampa FL Zip Code 33609

8. 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

Dennis P. Grinsteiner, C.F.O. January 09, 2001

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD STRAZ JR, DAVID A 4805 SWANN AVE TAMPA FL 33609	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD WEATHERBY, RICHARD L 12014 BREWSTER DR TAMPA FL 33626	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CVC WESTBROOK, KERRY M 8123 127TH ST NORTH SEMINOLE FL 33776	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV CALLIHAN, RICHARD L 2807 HAVERHILL DR CLEARWATER FL 33761	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV HUNT, SHARON S 4514 CLEWIS AVE TAMPA FL 33610	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAPMAN, STEPHANIE M 2413 JETTON AVE TAMPA FL 33613	☒ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Straz Jr, David A 4401 W. Kennedy Blvd, Ste 150 Tampa, FL 33609	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD Weatherby, Richard L 4401 W. Kennedy Blvd., Ste 300 Tampa, FL 33609	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/Cashier Westbrook, Kerry M 4401 W. Kennedy Blvd., Ste 300 Tampa, FL 33609	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sr VP/Sr Lender Callihan, Richard L 4401 W. Kennedy Blvd., Ste 300 Tampa, FL 33609	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sr VP/Asst Cashier Hunt, Sharon S 4401 W. Kennedy Blvd., Ste 300 Tampa, FL 33609	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sr VP / CFO Grinsteiner, Dennis P 4401 W. Kennedy Blvd., Ste 300 Tampa, FL 33609	☐ Change ☒ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: KERRY M. WESTBROOK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
E.V.P. & C.A.O. & CASHIER

1/18/01 813 207 0774
Date Daytime Phone #

CR2E034 (10/00)