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

CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 MAY -1 PM 3:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D

DOCUMENT # 013003 (9)

1. Corporation Name

CITIZENS BANK OF MACCLENNY, FLORIDA

| Principal Place of Business | Mailing Address |
|---|---|
| P O BOX 545<br>32 FIFTH STREET NORTH<br>MACCLENNY FL 32063 | P O BOX 545<br>32 FIFTH STREET NORTH<br>MACCLENNY FL 32063 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/01/1923

3a. Date of Last Report: 07/15/1994

2. Principal Place of Business — 21:

2a. Mailing Address — 26:

Suite, Apt. #, etc. — 22:

Suite, Apt. #, etc. — 27:

City & State — 23:

City & State — 28:

Zip — 24: Country — 25:

Zip — 29: Country — 30:

4. FEI Number: 59-0193810 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KENNEDY, JOHN D.
32 NORTH 5TH STREET
MACCLENNY FL 32063

10. Name and Address of New Registered Agent

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 _____ DATE
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|
| TITLE | V | 11 TITLE | D | ☐ Change ☒ Addition |
| NAME | BATES, RUTH | 12 NAME | Mary Knabb Thornton | |
| STREET ADDRESS | 2262 FOXWOOD DR. | 13 STREET ADDRESS | 1411 Ponte Vedra Blvd. | |
| CITY-ST-ZIP | ORANGE PARK FL | 14 CITY-ST-ZIP | Ponte Vedra Beach, FL | |
| TITLE | AVS | 21 TITLE | D | ☐ Change ☒ Addition |
| NAME | HURST, JEAN L | 22 NAME | T. W. Thornton | |
| STREET ADDRESS | 368 SO 5TH STREET | 23 STREET ADDRESS | 1411 Ponte Vedra Blvd. | |
| CITY-ST-ZIP | MACCLENNY FL | 24 CITY-ST-ZIP | Ponte Vedra, FL | |
| TITLE | DAV | 31 TITLE | D/AVP | ☒ Change ☐ Addition |
| NAME | KNABB, TODD L. | 32 NAME | L. Wendell Sigers | |
| STREET ADDRESS | 7770 BURMA RD. | 33 STREET ADDRESS | RT. 2, Box 712-1 | |
| CITY-ST-ZIP | JACKSONVILLE FL | 34 CITY-ST-ZIP | Macclenny, FL | |
| TITLE | CD | 41 TITLE | D/VC | ☒ Change ☐ Addition |
| NAME | KNABB, R.E. | 42 NAME | Larry R. Sigers | |
| STREET ADDRESS | 3707 ORTEGA BLVD. | 43 STREET ADDRESS | Rt. 2, box 678, Hwy 23-D | |
| CITY-ST-ZIP | JACKSONVILLE FL | 44 CITY-ST-ZIP | Macclenny, FL | |
| TITLE | DP | 51 TITLE | AVP | ☐ Change ☒ Addition |
| NAME | KENNEDY, JOHN D. | 52 NAME | Thomas E. Thornton | |
| STREET ADDRESS | US 121 NORTH | 53 STREET ADDRESS | 4406 Worth Drive, East | |
| CITY-ST-ZIP | MACCLENNY FL | 54 CITY-ST-ZIP | Jacksonville, FL | |
| TITLE | D | 61 TITLE | VP | ☒ Change ☐ Addition |
| NAME | MOBLEY, W. CHERILL | 62 NAME | Allen Kilgo | |
| STREET ADDRESS | HWY 23-A, NO. | 63 STREET ADDRESS | 6 Wells Road | |
| CITY-ST-ZIP | MACCLENNY FL | 64 CITY-ST-ZIP | Macclenny, FL 32063 | |

5/6/12

14. I do 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)(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: John D. Kennedy 4-27-95 904-259-3116

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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13. Officers and Directors

VP — Change

Wallace R. Smith, Jr.
Highway 125 South
Glen St. Mary, FL

VP — Change

Todd L. Knabb
7770 Burma Road
Jacksonville, FL

AVP — Addition

Roger D. Yarborough, Jr.
P. O. Box 1363
Glen St. Mary, FL