

**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 FEB 27 PM 12: 29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 018249 (3)

1. Corporation Name  
**BARNETT BANK OF LAKE OKEECHOBEE**

Principal Place of Business Mailing Address  
**305 NORTH PARROTT AVENUE OKEECHOBEE FL 34972-2916**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **11/13/1943** 3a. Date of Last Report **03/01/1994**  
4. FEI Number **59-0520424** 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

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**COLEMAN, RICHARD D  
205 NORTH PARROTT AVENUE  
OKEECHOBEE FL 34972**

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 registering)

DATE

12. OFFICERS AND DIRECTORS  
TITLE V  
NAME **OSTERMAYER, LARRY**  
STREET ADDRESS **739 JUNIPER PLACE**  
CITY - ST - ZIP **WILLINGTON FL**  
TITLE **PCCE**  
NAME **COLEMAN, RICHARD D**  
STREET ADDRESS **2502 SW 18TH CT**  
CITY - ST - ZIP **OKEECHOBEE FL**  
TITLE V  
NAME **GRAVES, CAROLYN**  
STREET ADDRESS **508 SW 5TH STREET**  
CITY - ST - ZIP **OKEECHOBEE FL**  
TITLE **FM**  
NAME **MOBLEY, PATSY**  
STREET ADDRESS **3950 SW 16TH STREET**  
CITY - ST - ZIP **OKEECHOBEE FL**  
TITLE V  
NAME **VICKERS, LILLIAN E.**  
STREET ADDRESS **2054 N.E. 54 TRAIL**  
CITY - ST - ZIP **OKEECHOBEE FL**  
TITLE V  
NAME **BENNETT, HATTIE**  
STREET ADDRESS **758 NE 101ST AVE**  
CITY - ST - ZIP **OKEECHOBEE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1 1 TITLE  Change  Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP  
2 1 TITLE  Change  Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP  
3 1 TITLE  Change  Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP  
4 1 TITLE  Change  Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP  
5 1 TITLE  Change  Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP  
6 1 TITLE  Change  Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

SEE ATTACHED SHEET

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 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual 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 a duly authorized agent of the corporation; 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 a duly authorized agent of the corporation; and that my name appears in Block 12 or Block 13 if changed, or on an attached sheet, with an address.

SIGNATURE: **RICHARD D. COLEMAN, PRESIDENT, CHAIRMAN & CEO** 2/14/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

813-357-4245

Please submit with total amount due in the form of a separate check for each filing. Payable in United States Funds through a United States Bank to Department of State. The fee is \$200.00. This office recommends that you refrain from using a money order for payment of your annual report fee. The production of a cancelled check, or money order, is critical in settling a dispute regarding the proper filing of an annual report. It is extremely difficult to obtain that verification from some money order companies. Please check with your bank for verification that your check has cleared before calling the annual report section for the status of your annual report filing.

If the check submitted with this report is returned by a bank for any reason, the report will be cancelled and considered not filed. The Department of State will administratively dissolve the corporation if a replacement check and annual report are not resubmitted within the prescribed time frame.

## GENERAL INSTRUCTIONS FOR 1995 ANNUAL REPORT

- BLOCK 1.** Block 1 is preprinted with the corporation's document number, the corporation's name, mailing address and principal place of business as previously reported to our office. The name of the corporation cannot be changed by way of this annual report. The name may be changed by filing an amendment with our amendment section. Please call the amendment section for information on filing a name change at (904) 487-6050. If a name change has been filed with our office since this form was preprinted on December 16, 1994, you may line through the old name and enter the new name of record.
- BLOCK 2.** If the preprinted principal place of business address in Block 1 is incorrect, enter the current principal place of business address in Block 2.
- BLOCK 2a.** If the preprinted mailing address in Block 1 is incorrect, enter the current mailing address in Block 2a. Please NOTE: All correspondence will be mailed to the mailing address of the corporation. A post office box is acceptable.
- BLOCK 3.** If Block 3 is blank, enter the date of incorporation or qualification with this office.
- BLOCK 3a.** Enter the file date of the last annual report, if applicable.
- BLOCK 4.** Enter your Federal Employer Identification (FEI) Number or check the appropriate box. If "APPLIED FOR" is preprinted in this space, you must now provide the FEI number. The Department of State does not issue FEI numbers. For assistance with obtaining FEI numbers, call the IRS at 1-800-829-1040. If a FEI number is pre-printed, it is not necessary to check one of the boxes unless the number is no longer valid.
- BLOCK 5.** Your canceled check will be your only filing acknowledgment unless a certificate of status is requested in Block 5 and an additional \$8.75 is enclosed. Certificates of status will be mailed to the mailing address of the corporation only. If you desire to have a certificate mailed to a different address, please submit a separate written request along with the fee of \$8.75 to the Certification Section at P.O. Box 6327, Tallahassee, FL 32314, after the annual report has been filed by our office.
- BLOCK 6.** Florida law allows for a voluntary contribution of \$5.00 per taxpayer for the purpose of providing for public financing of political campaigns for the Governor and members of the Cabinet. If you would like to contribute, check the box in Block 6 and include an additional \$5.00 with the filing fee.
- BLOCK 8.** Please check the appropriate box. Please direct all intangible tax questions to the Department of Revenue by calling 1-800-352-3671. Our office cannot assist in determining which box should be checked.
- BLOCK 9.** The law requires that each corporation have a registered agent with a street address in Florida. If the information in Block 9 is incorrect, make correction(s) in Block 10. The corporation cannot serve as its own registered agent. If the corporation is currently shown as the registered agent, please designate a different registered agent in Block 10 and have that person sign in Block 11. If the registered agent's address is a P.O. Box, you must enter a proper street address in Block 10. A P.O. Box is unacceptable for service of process.
- BLOCK 10.** Please enter the name and/or address of new registered agent. The registered agent must have a street address in Florida. A P.O. Box or mail service is not acceptable for service of process. The corporation cannot be its own registered agent but an officer or director from the corporation may be.
- BLOCK 11.** The new registered agent must indicate familiarity with section 617.0503, Florida Statutes, and acceptance of these obligations and appointment by signing in Block 11. No signature is necessary if the same registered agent is retained. If the registered agent is another corporation, the person signing must state their position within that corporation.
- BLOCK 12.** Block 12 contains the last information on officers/directors reported to our office. Please do not make any marks in block 12. Corrections or additions are to be made in block 13. If there is no change in the information, nothing else is required. NOTE: If an officer or director's address is confidential pursuant to section 119.07(3)(k), Florida statutes, an alternate address must be provided.
- BLOCK 13.** If the officer/director information is incorrect or incomplete in block 12, please provide the current information in this area. Check the appropriate box as to whether the information is a change or addition. Street addresses must be provided, if there is no street address, enter the mailing address accompanied by "N/A". Any further additional officers may be listed on an attached sheet. Changes or additions must be typed or printed legibly. Use the following symbols in the title line: P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; C = Chairman; M = Managing Director; Tr = Trustee. If a person holds more than one position, enter all positions, e.g., S/D; V/T/D. NOTE: If an officer or director's address is confidential pursuant to Section 119.07(3)(k), Florida Statutes, an alternate address must be provided. NOTE: A director must be a natural person 18 years of age or older.
- BLOCK 14.** Block 14 must be signed by a current officer or director listed in Block 12 or Block 13, if changed. All signatures must be original and in ink. A photocopy or stamped signature is not acceptable. If the corporation is in the hands of a receiver, it must be signed by the trustee or receiver. A signature placed on an attachment in lieu of placement in Block 14 is unacceptable.

**FILING FEE \$200.00**

**ANNUAL REPORT \$61.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE.  
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE**

BARNETT BANK OF LAKE OKEECHOBEE  
205 NORTH PARROTT AVENUE  
OKEECHOBEE, FL 34972-2916

1995 BANK OFFICERS AND ADDRESSES

RICHARD D. COLEMAN  
2502 SW 18TH COURT  
OKEECHOBEE, FL 34974  
PRESIDENT/CHAIRMAN/CEO

MICHAEL MCCANN  
2253 S.W. 3RD COURT  
OKEECHOBEE, FL 34972  
SR. VP/CORPORATE LOAN MANAGER

LARRY OSTERMAYER  
739 JUNIPER PLACE  
WELLINGTON, FL 33414  
SR.VP/ SENIOR CREDIT POLICY MGR.

CAROLYN GRAVES  
506 SW 5TH STREET  
OKEECHOBEE, FL 34974  
SR.VP/OFFICE MANAGER/MAIN OFFICE

LILLIAN VICKERS  
2054 NE 54TH TRAIL  
OKEECHOBEE, FL 34972  
SR.VP/DIRECT CONSUMER LOAN MANAGER

HATTIE RUTH BENNETT  
758 NE 101ST AVENUE  
OKEECHOBEE, FL 34972  
VP/ OFFICE MANAGER/BELLE GLADE

MICHAEL BENNETT  
7400 NW 84TH COURT  
OKEECHOBEE, FL 34972  
VP/DIRECT CONSUMER LOAN OFFICER

MARY JEAN HARRELL  
350 NW 113TH DRIVE  
OKEECHOBEE, FL 34972  
VP/OFFICE MANAGER/SOUTH OFFICE

BARBARA J. PHILLIPS  
3595 SW 21ST STREET  
OKEECHOBEE, FL 34974  
VP/BANK RESOURCE OFFICER

CHERI STRUBLE  
701 N.E. 5TH STREET  
OKEECHOBEE, FL 34972  
AVP/SALES SUPPORT MGR/RES.R/E

LINDA SHIREY  
355 SE 16TH AVENUE  
OKEECHOBEE, FL 34974  
VP/COMMUNITY AFFAIRS OFFICER

PATTI WILSON  
1605 SW 28TH STREET  
OKEECHOBEE, FL 34974  
SVP/RES R/E LOAN MANAGER

KRISTY CRAWFORD  
4391 SE 21ST COURT  
OKEECHOBEE, FL 34974  
RELATIONSHIP MGR. CORPORATE

TABITHA WILDES  
2360 NW 114TH STREET  
OKEECHOBEE, FL 34972  
AVP/MORTGAGE LOAN SPEC.RES.R/E

GAYLE ESTES  
14120 NE 14TH AVENUE  
OKEECHOBEE, FL 34972  
SALES & SERVICE MGR

PATSY MOBLEY  
3950 SW 16TH STREET  
OKEECHOBEE, FL 34974  
VP/ OPERATION SERVICE MGR.

PAULETTE WISE  
2932 SE 18TH COURT  
OKEECHOBEE, FL 34974  
AVP/MARKETING DIRECTOR

ARI RAULERSON  
12900 NW 144TH TRAIL  
OKEECHOBEE, FL 34974  
AVP/RELATIONSHIP MGR CORPORATE

GENE SNYDER  
7731 NW 92ND COURT  
OKEECHOBEE, FL 34972  
AVP/CONSUMER LOAN OFFICER

DANA M. WILSON  
2286 SW 2ND COURT  
OKEECHOBEE, FL 34974  
SVP/DIRECTOR OF RETAIL BANKING

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YVONNE BAKICH  
10 BASS STREET BHR  
OKEECHOBEE, FL 34974  
AVP/OFFICE MANAGER/MOORE HAVEN

SANDRA HERDOCIA  
3022 S.E. 34TH AVE  
OKEECHOBEE, FL 34974  
COMMUNITY RELATIONS OFFICER

NANCY BUSBEE  
14100 S.W. CONNORS HWY  
OKEECHOBEE, FL 34974  
AVP/RETAIL SALES & SERVICE MGR

RON HAYES  
1337 S.W. 19TH TERRACE  
OKEECHOBEE, FL 34974  
VP/HUMAN RESOURCE MANAGER

BRAD WEBER  
5775 N.E. 9TH LANE  
OKEECHOBEE, FL 34972  
VP/RELATIONSHIP MGR CORPORATE

JO ELLEN HENDERSON  
1966 SE WEST DUNBROOKE CIRCLE  
PORT ST LUCIE, FL 34952  
VP/RELATIONSHIP MGR CORPORATE

CAROL CREWS  
2948 NW 128TH AVENUE  
OKEECHOBEE, FL 34972  
AVP/OFFICE MANAGER/TAYLOR CREEK

KEVIN WILLIAMS  
3124 HWY 441 S.E.  
OKEECHOBEE, FL 34974  
SALES & SERVICE MGR

DELLA THOMPSON  
3291 RUCKS DAIRY RD  
OKEECHOBEE, FL 34974  
SALES & SERVICE MGR.

KATHY TILLMAN  
637 SE 32ND AVE  
OKEECHOBEE, FL 34974  
SALES & SERVICE MGR

SYLVIA STEVENS  
2914 SE 25TH ST  
OKEECHOBEE, FL 34974  
OPERATION MGR. MAIN BR

MANDY ROCK  
6072 NW 30TH ST  
OKEECHOBEE, FL 34972  
RELATIONSHIP MGR CORPORATE

SHANNON CONRAD  
3745 N.W. 31ST AVE  
OKEECHOBEE, FL 34972  
BOARD SECRETARY