

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

FILED

Jan 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 018280 (8)

1. Corporation Name
CENTRAL BANK OF TAMPA

Principal Place of Business
**2307 W. KENNEDY BLVD.
TAMPA FL 33609**

Mailing Address
**2307 W. KENNEDY BLVD.
TAMPA FL 33609-3301**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/23/1946	3a. Date of Last Report 01/29/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-0558555		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	30 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent GRIFFITHS, EDWARD G 2307 E KENNEDY BOULEVARD TAMPA FL 33609		10. Name and Address of New Registered Agent	
		81 Name ANTHONY V. FERLITA	
		82 Street Address (P.O. Box Number is Not Acceptable) 2307 W. KENNEDY BLVD.	
		83	
		84 City TAMPA	85 Zip Code FL 33609

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 *Anthony V. Ferlita* **ANTHONY V. FERLITA, PRESIDENT & CEO** 1/6/97
Signature, Name, and Title of registered agent and file if applicable (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE PRESIDENT DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GLOVER, DUDLEY V., JR.		1.2 NAME ANTHONY V. FERLITA	
STREET ADDRESS 2512 PALM DRIVE		1.3 STREET ADDRESS 18701 CHEMILLE DRIVE	
CITY-ST-ZIP TAMPA FL		1.4 CITY-ST-ZIP LUTZ, FLORIDA 33549	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE PD	<input type="checkbox"/> DELETE	2.1 TITLE	
NAME FERLITA, ANTHONY V		2.2 NAME	
STREET ADDRESS 906 SANDYWOOD DRIVE		2.3 STREET ADDRESS	
CITY-ST-ZIP BRANDON FL		2.4 CITY-ST-ZIP	
TITLE VCD	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MASSARI, FRANK A DR		3.2 NAME	
STREET ADDRESS 1911 BENDELOW TRAIL		3.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL		3.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FICARROTTA, JOSEPH R.		4.2 NAME	
STREET ADDRESS 3211 AZEELE STREET		4.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL		4.4 CITY-ST-ZIP	
TITLE CD	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FERLITA, JOHN X		5.2 NAME	
STREET ADDRESS 4815 RIVERSHORE DRIVE		5.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL		5.4 CITY-ST-ZIP	
TITLE EVPO	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LOMBARDIA, BRAULIO J		6.2 NAME	
STREET ADDRESS 3112 LAUREL STREET		6.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL		6.4 CITY-ST-ZIP	

14. I do 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 from an attachment with an address.

SIGNATURE *Anthony V. Ferlita* **PRESIDENT & CEO** 1/6/97 (813) 253-3302
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #