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

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FILED PROFIT Feb 06 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # (2) THE CITIZENS BANK OF PERRY Principal Place of Business Mailing Address 100 N. ORANGE ST. P.O BOX 1247 PERRY FL 32347 PERRY FL 32348 DO NOT WRITE IN THIS SPACE LIS 3. Date Incorporated or Qualified 01/15/1958 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For P.O. BOX 1247 100 N ORANGE ST 59-0828474 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be PERRY, FL PERRY, FL 23 28 Trust Fund Contribution Added to Fees Country Country Ζip 8. This corporation owes or has paid the current year Intangible 32347 Personal Property Tax due June 30. TAYLOR 32348 TAYLOR X Yes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DICKERT, JERRY D 100 N. ORANGE ST. Street Address (P.O. Box Number is Not Acceptable) 62 PERRY FL 32347-2741 83 84 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 lamiliar 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) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition WILDE, THOMAS W NAME 1.2 NAME 295 E PALMER MILL RD STREET ADORESS 1.3 STREET ADDRESS MONTICELLO FL CITY-ST-ZIP 1.4 CITY-ST-ZIP □ DELETE Change Addition TITLE 2.1 TITLE BROOKS, ROGER NAME 22 NAME #05 WORLEY WAY STREET ADDRESS 2.3 STREET ADDRESS **Pe**rry Fl CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE Brooks, marvin k NAME 32 NAME **\$09 GLENRIDGE RD** STREET ADDRESS 3 3 STREET ADDRESS **Perry** Fl CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 41 TITLE HICKS, MARSHALL NAME 4 2 NAME **400 E ASH STREET** STREET ADDRESS 4.3 STREET ADDRESS **PERRY FL** 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE DICKERT, JERRY NAME 5.2 NAME 417 PLANTATION RD. STREET ADDRESS 5.3 STREET ADDRESS **PERRY FL** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition CRUCE, JENNIFER NAME 6.2 NAME 100 N. ORANGE ST. STREET ADDRESS 6.3 STREET ADDRESS **PERRY FL** CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, yo on an attachment with an address.

ROGER BROOKS, PRESIDENT/CEO 1-27-98 850/584-4411