

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 18 PM 4:26

DOCUMENT # **229926** (1)

1. Corporation Name
FIRST BANK OF INDIANTOWN

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 15588 S W WARFIELD BLVD P O BOX 365 INDIANTOWN FL 34956	Mailing Address 15588 S W WARFIELD BLVD P O BOX 365 INDIANTOWN FL 34956
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/06/1959		3a. Date of Last Report 06/28/1994	
2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip Country 25	2a. Mailing Address 26 Suite, Apt. #, etc 27 City & State 28 Zip Country 29	4. FEI Number 59-0879274	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
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 APPLETON, EDWARD C. 15588 SW WARFIELD BLVD INDIANTOWN FL 34956				10. Name and Address of New Registered Agent			
B1 Name				B5 Zip Code			
B2 Street Address (P.O. Box Number is Not Acceptable)				FL			
B3				City			
B4				City			

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 _____ (NOTE: Registered Agent signature required when changing office)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SV CULBERSON, BARBARA 155SE 36TH TERR. OKEECHOBEE FL	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DC POST, JR. R 61 SE HARBOR PT. DRIVE STUART FL	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WALL, HARRIS H. LITTLE RANCH ESTATES INDIANTOWN FL---	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D Deceased
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP APPLETON, EDWARD C. 15588 SW WARFIELD BLVD. INDIANTOWN FL	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AV CHILSON, MILDRED SPRING HAVEN ESTATES INDIANTOWN FL	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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)(k), 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 authorized 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 as an attachment with an address.

SIGNATURE: *Barbara Culberson* April 13, 1995 (407) 597-2181
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR
Barbara Culberson, Sr. V.P. & Cashier

ATTACHMENT - BLOCK 12

229926

**CORPORATION ANNUAL REPORT - 1995
FIRST BANK OF INDIANTOWN**

**Names and addresses of Officers and Directors
December 31, 1994**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**D
Malcolm DuBois
16000 Windrift Dr.
Jupiter, FL 33477**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**D
William B. Wilcox
3905 SW San Clemente Ct.
Palm City, FL 34990**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**D
Thomas J. Higgins
2300 SE St. Lucie Blvd.
Stuart, FL 34996**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**D
Wm. A. Oughterson
70 North River Rd.
Stuart, FL 34996**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**D
George C. Young, Jr.
6832 SW Lasso Lane
Palm City, FL 34990**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**V
Larry J. Stevens
15180 - 69th Dr. No.
Palm Beach Gardens, FL 33418**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**V
Gloria Zucaro
3015 NE Loquat Lane
Jensen Beach, FL 34957**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**V
Kelli Marcum
8631 S.E. Sandcastle Circle
Hobe Sound, FL 33455**