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 APR 17 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 371597 (6)

1. Corporation Name
GULF STATE BANK

Principal Place of Business	Mailing Address
NORTHWEST CORNER OF US HWY.. 98 (US 319) AND SECOND STREET CARRABELLE FL	NORTHWEST CORNER OF US HWY.. 98 (US 319) AND SECOND STREET CARRABELLE FL

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/19/1970	3a. Date of Last Report: 02/09/1994
2. Principal Place of Business (21)	2a. Mailing Address (26): P.O. Box GG
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28): Carrabelle, FL
Zip (24) / Country (25)	Zip (29): 32322 / Country (30)
4. FEI Number: 59-1309253	☐ 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

ROBISON, JANE
GULF STATE BANK
73RD AVENUE E P.O. BOX 488
APALACHICOLA FL 32320

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	PCD	1.1 TITLE	☐ Change ☐ Addition
NAME	BUTLER, JOE W.	1.2 NAME	
STREET ADDRESS	US 98	1.3 STREET ADDRESS	
CITY-ST-ZIP	CARRABELLE FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	BUTLER, CLIFF	2.2 NAME	
STREET ADDRESS	N. BAYSHORE DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	EASTPOINT FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	BURDA, JOHN L.	3.2 NAME	
STREET ADDRESS	US 98	3.3 STREET ADDRESS	
CITY-ST-ZIP	CARRABELLE FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	HOWELL, ROBERT L.	4.2 NAME	
STREET ADDRESS	15 ADAMS ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	APALACHICOLA FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	PETTEWAY, JR., CARL G.	5.2 NAME	
STREET ADDRESS	6TH STREET & 21ST AVENUE	5.3 STREET ADDRESS	
CITY-ST-ZIP	APALACHICOLA FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	JACKSON, GEORGE	6.2 NAME	
STREET ADDRESS	OWENS AVENUE	6.3 STREET ADDRESS	
CITY-ST-ZIP	CARRABELLE FL	6.4 CITY-ST-ZIP	

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: Jane Robison 4-7-95 (904) 697-3355
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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7	D	J BEN WATKINS	41 COMMERCE STREET	APALACHICOLA, FL
8	D	BRUFORD A FLOWERS	US 98	EASTPOINT, FL
9	V	JANE ROBISON	SECOND STREET WEST	CARRABELLE, FL
10	V	FRANKLIN J MATHES JR.	RYAN DRIVE	CARRABELLE, FL
11	V	WILL KENDRICK	P O BOX K N/A	CARRABELLE, FL
12	AV	CAROLYN SMITH	EAST TENTH STREET	CARRABELLE, FL
13	AV	JAMES G HAMILTON	6 BIG OAKS	APALACHICOLA, FL
14	AV	MARY ANN OSBURN	195 HIGHLAND PARK	APALACHICOLA, FL
15	AV	ELIZABETH MOSELEY	P O BOX 264 N/A	EASTPOINT, FL
16	AV	ROSE LOWE	71-9TH ST	APALACHICOLA, FL
17	AV	SIDNEY A. WINCHESTER	P O BOX 143	CARRABELLE, FL