2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 26, 2001 8:00 am Secretary of State **DOCUMENT # 371597** 1. Entity Name **GULF STATE COMMUNITY BANK** 01-26-2001 90090 013 ***150.00 Principal Place of Business Mailing Address NORTHWEST CORNER OF US HWY., 98 P O BOX GG (US 319) AND SECOND STREET (US 319) AND SECOND STREET CARRABELLE FL CARRABELLE FL 32322 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1309253 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROBISON, JANE Street Address (P.O. Box Number is Not Acceptable) **GULF STATE BANK** 73RD AVENUE E P.O. BOX 488 APALACHICOLA FL 32329 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CHAR TITLE ☐ Delete ☐ Addition TITLE Change NAME BUTLER, JOE W. NAME STREET ADDRESS HC 62 BOX 38 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CARRABELLE FL 32322 TITLE PCD Delete TITLE ☐ Change ☐ Addition NAME BUTLER, CLIFF NAME STREET ADDRESS N. BAYSHORE DRIVE STREET ADDRESS CITY-ST-ZIP EASTPOINT FL CITY-ST-ZIP TITLE ☐ Delete TITI F Change ☐ Addition BURDA, JOHN L. NAME -NAME STREET ADDRESS US 98 STREET ADDRESS CITY-ST-ZIP CARRABELLE FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME HOWELL, ROBERT L. NAME STREET ADDRESS 15 ADAMS ST. STREET ADDRESS CITY-ST-ZIP APALACHICOLA FL CITY-ST-ZIP TITLE ☐ Delete TITLE Addition Change NAME JACKSON, GEORGE NAME STREET ADDRESS OWENS AVENUE STREET ADDRESS CITY-ST-ZIP CARRABELLE FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME CHORBA, NANCY V. NAME STREET ADDRESS 2312 TALLY HO ST STREET ADDRESS CITY-ST-ZIP ST GEORGE ISLAND FL 32328 CITY-ST-ZIP

changed, or on an attachment with an address, with all other like empowered. SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGN

13. I 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 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 the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

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GULF STATE COMMUNITY BANK DOCUMENT #371597 2001 CORPORATION ANNUAL REPORT FEIN 59-1309253

OFFICERS AND DIRECTORS CONTINUED

D FLOWERS, BRUFORD A., US HWY 98, EASTPOINT FL 32328

D WATKINS, J. BEN, MARINE ST., CARRABELLE, FL 32322

SVP ROBISON, JANE 2ND ST WEST, CARRABELLE, FL 32322

SVP MATHES, FRANKLIN J., JR., RYAN DR., CARRABELLE, FL 32322

SVP BUTLER, DAVID K., HWY 98, CARRABELLE, FL 32322

AUDITOR HAMILTON, JAMES G., 6 BIG OAKS, APALACHICOLA, FL 32320

CASHIER OSBURN, MARY ANN, 195 HIGHLAND PARK, APALACHICOLA, FL 32320

VP MOSELEY, ELIZABETH, P O BOX 264, EASTPOINT, FL 32328

VP LOWE, ROSE, 71 9TH ST., APALACHICOLA, FL 32320

BUSINESS DEVELOPMENT OFFICER WINCHESTER, SIDNEY A., $3^{\rm RD}$ ST WEST, CARRABELLE, FL 32322

VP CRUM, EMILY N., P O BOX 684, EASTPOINT, FL 32328

VP LANGLEY, MARJORIE, P O BOX 220, EASTPOINT, FL 32328