		PLEASE READ	ALL INS	TRUCTION	IS BEFORE (OMPLET	ING THIS FOR		
ব্	PLICAT FOR	ION			MENT OF STATE		FILED		
DOCUMENT # 392679						00 OCT 19 AM 11: 46			
1. Corporation Name						SECRETARY OF STATE			
BANK OF PENSACOLA						TALL AHASSEE FLORIDA 8000034479685 -11/02/0001007002			
Principal Place of Business Mailing Address						-	-11/U2/UU- ****150_0		
P.O. BOX 12092 P.O. BOX PENSACOLA FL 32524-7885 PENSACOL				A FL 20524-7805 32.591					
If above addresses are incorrect in any way, line through incorrect information and enter correction belo New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable						Date Incorporated or Qualified			
Bank				of Pensacola		To Do Busin	ness in Florida	12/09/1971	
				Box 12966		5. FEI Numbe		Applied For	
City & State City & State Pens				Locala EI		6.	59-1378561	Not Applicable	
Zip Country			Zip 32591				E OF STATUS DESIRED 🔲 S	8,75 Additional Fee required for a Certificate of Status	
7. Names	and Street Ad	dresses of Each Officer ar				ast 3 directors)			
Title(s)	Name of Officers and/or Directors 2			Street Address of Each Officer and/or Director			City / State / Zip		
СР	P TAYLOR, W LUTHER			4641 CANOPY ROAD			PENSACOLA FL	32504	
SVD	VD FAIR, ROBERT L.			1510 BAYSHORE DR			PENSACOLA FL 325	01	
VP	SCHUBERT, ASHLEY H JR			1815 E STRONG ST			PENSACOLA FL 3250	01	
VP	/P WADE, PAMELA E.				IEBA DR		CANTONMENT FL	32533	
SVD	SVD YOUD, JOSEPH R. JR.				1106 HARBOR LANE 50 Highpoint Dr.			32561	
VP .	WILLIAMS, SARAH L.			7725 LEGRANDE DR.			PENSACOLA, FL 0	32504	
	8. Nam	e and Address of Curre	nt Registered Ag	ent	Name	9. Name and	Address of New Registered	d Agent	
Name Jo						ph R. You	i, Jr.		
YOUD, JOSEPH R., JR. 7150 NORTH NINTH AVENUE						Street Address (P.O. Box Number is Not Acceptable) 400 West: Garden Street			
					Suite, Apt. #, Etc				
					City Pensacola,		Sta	- 1 - 1	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.									
Signature of Registered Agent REGISTERED AGENT MUST SIGN							Date <u>October</u>	16, 2000	
<u> </u>		-(/	KENT TEREO AC	JENT MUST SIGN	· · · · · · · · · · · · · · · · · · ·				
11. I certify	that I am an o	officer or director or the rec	eiver or trustee e	npowered to exec	cute this application as	provided for in cha	apter 607 or 617, F.S. I furth	er certify that when filing	

this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401, F.S. that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The info indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

October 16, 2000

<u>(850)</u> 436-7800

Daytime Phone #





Bank of Pensacola-

P.O. Box 12966 Pensacola, FL 32591-2966

October 16, 2000

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

Due to a mailing address mishap the Bank of Pensacola did not receive any Coprporate Applications or notices thereafter. The address has been corrected on the enclosed application to prevent further mishaps in the mailing process.

Pursuant to my conversation with Andy today, you will find enclosed our annual report for "Profit Corporation" and a check for the regular annual fee.

If I can be of any further assistance with this matter please do not hesitate to contact me at (850) 436-7800.

Sincerely,

Executive Vice President

JRY/tja

Enclosures