
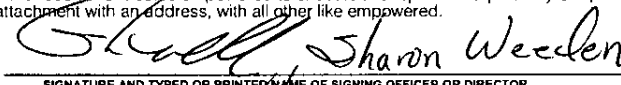


# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

06 APR -7 AM 9:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # 465683</b> 1. Entity Name THE TALLAHASSEE STATE BANK					
Principal Place of Business 2720 WEST TENNESSEE STREET P. O. BOX 2275 TALLAHASSEE, FL 32316			Mailing Address 2720 WEST TENNESSEE STREET P. O. BOX 2275 TALLAHASSEE, FL 32316		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
6. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301				7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;"><b>FL</b></span> Zip Code	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Amended AR is \$61.25</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees 000073988780 05/04/06--01019--031 **\$61.25	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CROOMS, JEFFREY MD		NAME	Arun Kundra	
STREET ADDRESS	1232 PENNYLANE		STREET ADDRESS	132 Summerbrooke Dr	
CITY-ST-ZIP	TALLAHASSEE, FL		CITY-ST-ZIP	Tallahassee, FL	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GARDNER, CHARLES R		NAME	William Durham	
STREET ADDRESS	1731 ARMISTEAD PLACE		STREET ADDRESS	2504 Centerville Ct	
CITY-ST-ZIP	TALLAHASSEE, FL		CITY-ST-ZIP	Tallahassee, FL	
TITLE	S	<input type="checkbox"/> Delete	TITLE	C/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCCLURE, JEANNIE		NAME	William B. Moore	
STREET ADDRESS	8420 AUGUSTWOOD LANE		STREET ADDRESS	516 S. Ride	
CITY-ST-ZIP	TALLAHASSEE, FL		CITY-ST-ZIP	Tallahassee, FL 32303	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CALLAWAY, JIMMIE		NAME	David Saint MD	
STREET ADDRESS	3031 LAKESHORE DR.		STREET ADDRESS	9925 Lantern Light Rd	
CITY-ST-ZIP	TALLAHASSEE, FL		CITY-ST-ZIP	Tallahassee, FL 32312	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	EVP/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BEVERLY, JOE E		NAME	Bill Moore	
STREET ADDRESS	1132 GORDON AVE		STREET ADDRESS	332 Desoto St	
CITY-ST-ZIP	THOMASVILLE, GA 31792		CITY-ST-ZIP	Tallahassee, FL	
TITLE	D	<input type="checkbox"/> Delete	TITLE	PID	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEEDEN, SHARON		NAME	Weeden Sharon	
STREET ADDRESS	3049 O'BRIEN DR.		STREET ADDRESS	3049 O'Brien Dr	
CITY-ST-ZIP	TALLAHASSEE, FL		CITY-ST-ZIP	Tallahassee, FL	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: 4/6/06 Daytime Phone #: 850-205-5161	