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CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 24 PM 3:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **516731** **(7)**

1. Corporation Name

GAINESVILLE STATE BANK

Principal Place of Business	Mailing Address
2814 S.W. 34TH STREET P. O. BOX 147002 GAINESVILLE FL 32602	2814 S.W. 34TH STREET P. O. BOX 147002 GAINESVILLE FL 32602

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/19/1976	3a. Date of Last Report: 04/20/1994
4. FEI Number: 59-1714719	☐ 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	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

WALLS, CARL
2814 SW 34TH STREET
GAINESVILLE FL 32606

10. Name and Address of New Registered Agent

31 Name

32 Street Address (P.O. Box Number is Not Acceptable)

33

34 City **FL** 35 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	C BUTLER, S. CLARK 2308 SW 13 ST. STE 1210 GAINESVILLE FL	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D E. Hill Brannon, Jr. POB 609 N/A Keystone Heights, Fl 32656	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAWES, T. J. 3525 N. MAIN STREET GAINESVILLE FL	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D Michael L. Hanks Rt 3 Box 1137 N/A Starke, Fl 32091	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HENDERSON, FRED L. 3501 S. MAIN ST., STE. 1 GAINESVILLE FL	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D Ernest L. Higbee, Jr. 3202 SW 81st Ct. Gainesville, Fl 32607	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WALLS, CARL 2814 SW 34TH STREET GAINESVILLE FL	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D Ledger K. Walker 113 NW 8th Ave. Gainesville, Fl 32601	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SINGLETON,GEORGE T. M228 MEDICAL SCIENCE BLD GAINESVILLE FL	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	D Michael E. Warren 1202 NW 9th Ave. Gainesville, Fl 32601	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	See attached for Officers	☐ Change ☒ 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)(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: _____ 4-17-95 904 375 3400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0084864 CP

LIST OF OFFICERS OF

Gainesville State Bank

(Print Name of Financial Institution)

FOR THE YEAR 1995

NAME OF OFFICER	TITLE	MAILING/RESIDENCE ADDRESS (STREET OR BOX #)	CITY/TOWN	STATE	ZIP CODE	SOCIAL SECURITY NUMBER
Carl F. Walls	President	6401 SW 35th Way	Gainesville	FL	32608	234-66-7652
John A. Januszewski	VP/Sr. Loan Ofc.	Rt. 2 Box 816	Micanopy	FL	32667	342-36-7891
Patricia H. Stark	VP/Cashier	3523 SW 15th St.	Gainesville	FL	32608	267-45-6262
Alice Colson	VP/Br. Administ.	P.O. Box 314	Newberry	FL	32669	266-59-0162
Cathy Adams	VP/Br. Manager	3658 NW 39th Ave.	Gainesville	FL	32605	259-98-8504
Doris Buckley	Vice President	Rt. 2 Box 2462	Melrose	FL	32666	264-48-2625
James Emerson	VP/Br. Manager	Rt. 2 Box 120	Micanopy	FL	32667	261-52-0352
Carl Miller	VP/Loan Officer	P.O. Box 140862	Gainesville	FL	32608	264-86-5013
Sheri Higginbotham	VP/Comptroller	217 Turkey Creek	Alachua	FL	32615	172-56-0297
Freda Harris	AVP/DP Officer	7674 Oak Drive	Keystone Heights	FL	32656	265-04-3443
Denise Cason	AVP/Br. Oper.	2302 SW 73rd Terrace	Gainesville	FL	32607	267-25-4939
Kathy Connolly	Branch Manager	B-2 Ari Woods	Keystone Heights	FL	32656	080-40-9863
Chuck Kemeth	Branch Manager	8601 SW 5th Place	Gainesville	FL	32607	261-64-8165
Rita Bishop	Br. Oper. Officer	P.O. Box 388	Keystone Heights	FL	32656	252-84-7403
Linda Clark	AVP/Resid. Mtg.	7516 SW 77th St.	Gainesville	FL	32607	266-06-9133
Pat Bennett	Comm. Svc. Ofc.	6956 Gatorbone Rd.	Keystone Heights	FL	32656	263-66-1158
Robert Whatley	VP/Indirect Lend	1641 NW 10th Ave	Gainesville	FL	32605	264-46-8647
Erica Debes	Comm. Lending Ofc.	3540 SW Archer #172	Gainesville	FL	32608	024-58-3302
Sally Whitehead	Branch Manager	2725 NW 38th St.	Gainesville	FL	32605	265-90-0838
Debra Gray	Compliance Ofc.	7713 SW 9th Place	Gainesville	FL	32607	263-96-9512
John Martin	Auditor	6790 Spring Lake Vill.	Keystone Heights	FL	32656	267-66-7514

STATE