

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 13, 2004 8:00 am
Secretary of State

01-13-2004 90012 032 ***158.75

DOCUMENT # 681463

1. Entity Name
BAY BANK & TRUST CO.



Principal Place of Business
**509 HARRISON AVE
PANAMA CITY, FL 32401-9621**

Mailing Address
**509 HARRISON AVE
PANAMA CITY, FL 32401-9621**



01082004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2055009

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**J.G. Hindsman, III
Bay Bank & Trust Co.
509 Harrison Avenue
Panama City, FL 32401**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VS
NAME HINDSMAN, JOHN G. III
STREET ADDRESS 602 COLORADO AVENUE
CITY-ST-ZIP LYNN HAVEN, FL 32444

TITLE DP
NAME LEWIS, E. CLAY III
STREET ADDRESS 202 N COVE BLVD
CITY-ST-ZIP PANAMA CITY, FL

TITLE DC
NAME PADGETT, EARL
STREET ADDRESS 236- OCEAN WAY
CITY-ST-ZIP VERO BEACH, FL

TITLE VP
NAME VANLANDINHAM, ROBERT
STREET ADDRESS 107 LIMESTONE LANE
CITY-ST-ZIP PANAMA CITY, FL 32405

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. 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 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

J.G. Hindsman, III, EVP/Cashier 1/8/04 850-769-3333

Date

Daytime Phone #