

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 723431

FILED
Apr 28, 2003
Secretary of State

Entity Name: FLORIDA BANKERS ASSOCIATION, INC.

Current Principal Place of Business:

1001 THOMASVILLE ROAD
TALLAHASSEE, FL 323021360

New Principal Place of Business:

Current Mailing Address:

1001 THOMASVILLE ROAD
TALLAHASSEE, FL 323021360

New Mailing Address:

FEI Number: 59-1398673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, ALEJANDRO M
1001 THOMASVILLE ROAD
TALLAHASSEE, FL 323021360 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: KERR, THOMAS
Address: 1001 THOMASVILLE RD
City-St-Zip: TALLAHASSEE, FL 32313

Title: TD () Delete
Name: LOPEZ, MIRIAM
Address: 48 EAST FLAGLER ST. 4TH FLOOR
City-St-Zip: MIAMI, FL 33131

Title: V () Delete
Name: CORUM, BETHANY
Address: 1001 THOMASVILLE RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: DT () Delete
Name: DODSON, WALTER
Address: US HWY 215
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: KERR, THOMAS
Address: 1001 THOMASVILLE RD
City-St-Zip: TALLAHASSEE, FL 32313

Title: D (X) Change () Addition
Name: DARGAN, THOMAS H
Address: 444 SEABREEZE BLVD SUITE 100
City-St-Zip: DAYTONA BEACH, FL 32118

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: SMITH, JERRY
Address: 15000 NW 140TH STREET
City-St-Zip: ALACHUA, FL 32615

Title: D () Change (X) Addition
Name: FIELDS, MIKE
Address: 315 SOUTH CALHOUN STREET
City-St-Zip: TALLAHASSEE, FL 32302

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS F. KERR

V

04/28/2003

Electronic Signature of Signing Officer or Director

Date