

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 846652

1. Entity Name

ESCAMBIA COUNTY BANK, INCORPORATED

FILED

Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90017 041 ***150.00

Principal Place of Business

Mailing Address

P.O. BOX 601
RINGOLD AT PALAFOX
FLOMATON AL 36441

P.O. BOX 601
RINGOLD AT PALAFOX
FLOMATON AL 36441

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 63-0068160

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STUCKEY, R.J. JR.
750 BRIGGS BLVD.
CENTURY FL 32535

Name

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

City

FL

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.

SIGNATURE *R J Stuckey, Jr* R J Stuckey, Jr 04/11/2001

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PC ☐ Delete
NAME JONES, JAMES R.
STREET ADDRESS 89 RED MAPLE DR, BOX 594
CITY-ST-ZIP FLOMATON AL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME SCOTT, NETTIE
STREET ADDRESS BOX 643, 203 STATELINE RD
CITY-ST-ZIP FLOMATON AL

TITLE DV ☒ Change ☐ Addition
NAME Scott, Nettie
STREET ADDRESS 203 Stateline Road
CITY-ST-ZIP Flomaton AL

TITLE V ☐ Delete
NAME MCCUTCHIN, CHARLES J.
STREET ADDRESS 3859 OLD ATMORE ROAD
CITY-ST-ZIP FLOMATON AL

TITLE DVS ☒ Change ☐ Addition
NAME McCutchin, Charles J
STREET ADDRESS 3859 Old Atmore Road
CITY-ST-ZIP Flomaton AL

TITLE DV ☐ Delete
NAME DEWITT, WALTER A.
STREET ADDRESS 222 RED MAPLE DR
CITY-ST-ZIP FLOMATON AL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DS ☒ Delete
NAME GEORGE, RUTH
STREET ADDRESS 554 DOGWOOD RD
CITY-ST-ZIP BREWTON AL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Change ☒ Addition
NAME Johnson, Rebecca C
STREET ADDRESS 609 Pineview Cemetery Road
CITY-ST-ZIP Brewton AL 36426

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *James R Jones* James R Jones
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/11/2001 (334) 296-5356

Date Daytime Phone #

CR2E034 (10/00)