2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2004
Secretary of State

DOCUMENT# F00000002145

Entity Name: THE BANKERS BANK (GEORGIA)

Current Principal Place of Business:

2410 PACES FERRY ROAD, SUITE 600
ATLANTA, GA 30339 US

New Principal Place of Business:

2410 PACES FERRY ROAD
SUITE 600
ATLANTA, GA 30339 US

Current Mailing Address:

2410 PACES FERRY ROAD, SUITE 600
ATLANTA, GA 30339 US

New Mailing Address:

2410 PACES FERRY ROAD
SUITE 600
ATLANTA, GA 30339 US

FEI Number: 58-1630871 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LEONARD, BRUCE P
Address: 2410 PACES FERRY ROAD, SUITE 600
City-St-Zip: ATLANTA, GA 30339 US

Title: V ( ) Delete
Name: BRYAN, TOM P
Address: 2410 PACES FERRY ROAD, SUITE 600
City-St-Zip: ATLANTA, GA 30339 US

Title: ST ( ) Delete
Name: TWEDDLE, KEVIN
Address: 2410 PACES FERRY ROAD, SUITE 600
City-St-Zip: ATLANTA, GA 30339 US

Title: D ( ) Delete
Name: WOLFE, TONY W
Address: 218 SOUTH MAIN AVE.
City-St-Zip: NEWTON, NC 28658 US

Title: D ( ) Delete
Name: BENNETT, PAUL T
Address: 104 NORTH DIXON STREET
City-St-Zip: ALMA, GA 31510 US

Title: CD ( ) Delete
Name: HART, RICK
Address: 1820 WEST END AVE
City-St-Zip: NASHVILLE, TN 37202 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GULLEDGE, ROBERT I
Address: 2410 PACES FERRY ROAD, SUITE 600
City-St-Zip: ATLANTA, GA 30339 US

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

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

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

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN M TWEDDLE ST 02/23/2004

Electronic Signature of Signing Officer or Director — Date