2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F00000002145

Entity Name: THE BANKERS BANK (GEORGIA)

FILED Oct 12, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2410 PACES FERRY ROAD SUITE 600 ATLANTA, GA 30339 **Current Mailing Address: 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: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: JUSTIN S. PERRY Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition GULLEDGE, ROBERT I Name: Name: BRYAN, THOMAS A 2410 PACES FERRY ROAD, SUITE 600 2410 PACES FERRY ROAD, SUITE 600 Address: Address: City-St-Zip: ATLANTA, GA 30339 US City-St-Zip: ATLANTA, GA 30339 US Title: Title: () Delete (X) Change () Addition HOWELL, EARL C Name: BRYAN, TOM P Name: 2410 PACES FERRY ROAD, SUITE 600 2410 PACES FERRY ROAD, SUITE 600 Address: Address: ATLANTA, GA 30339 US ATLANTA, GA 30339 US City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition TWEDDLE, KEVIN REID, DALE A Name: Name: 2410 PACES FERRY ROAD, SUITE 600 2410 PACES FERRY ROAD, SUITE 600 Address: Address: ATLANTA, GA 30339 US City-St-Zip: ATLANTA, GA 30339 US City-St-Zip: Title: (X) Delete Title: () Change () Addition WOLFE, TONY W Name: Name: Address: 218 SOUTH MAIN AVE. Address: City-St-Zip: NEWTON, NC 28658 US City-St-Zip: Title: (X) Delete Title: () Change () Addition BENNETT, PAUL T Name: Name: 104 NORTH DIXON STREET Address: Address: City-St-Zip: ALMA, GA 31510 US 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JUSTIN S. PERRY GC 10/12/2005

(X) Delete

HART, RICK

1820 WEST END AVE

NASHVILLE, TN 37202 US

Title:

Name:

Address:

City-St-Zip:

() Change () Addition