

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

08 FEB 27 AM 9:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F04000002831			
1. Corporation Name United Bank			
2. Principal Office Address - No P.O. Box # 200 E Nashville Ave		3. Mailing Office Address PO Box 8	
State, Apt. #, etc.		State, Apt. #, etc.	
City & State ATMORE, AL		City & State ATMORE, AL	
Zip 36502	Country USA	Zip 36502	Country USA
7. Name and Address of Current Registered Agent			
Name CT Corporation			
Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road			
Suite, Apt. #, Etc.			
City Plantation	State FL	Zip Code 33324	
8. I, being designated the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent Madonna Cuddihy Special Assistant Secretary 2/6/08 REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES	Robert R Jones III	200 E Nashville Ave	ATMORE, AL 36502
Chair	William J Justice	200 E Nashville Ave	ATMORE, AL 36502
Vice Chair	David D Swift	200 E Nashville Ave	ATMORE, AL 36502
Sec	Tina N Brooks	200 E Nashville Ave	ATMORE, AL 36502
CFO	Allen O Jones	200 E Nashville Ave	ATMORE, AL 36502
COMPTROLLER	Dale Johnson	200 E Nashville Ave	ATMORE, AL 36502
10. I certify that I am an officer or director of the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.			
SIGNATURE: Tina N Brooks - Tina N Brooks 2/19/08 251-446-6001			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

REINSTATEMENT 05-08

200118924842
02/27/08--01023--017 **600.00

4. Date Incorporated or Qualified To Do Business in Florida May 27, 2004	Applied For
5. FEI Number 630838150	Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status	

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

④ Continued

Page 282

D - J. Wayne Trawick	200 E Nashville Ave -	Atmore, AL 36502
D - Walter Crim	200 E Nashville Ave	Atmore, AL 36502
D - Dale Ash	200 E Nashville Ave	Atmore, AL 36502
D - Michael R. Andreoli	200 E Nashville Ave	Atmore, AL 36502
D - Leslie H. Cunningham	200 E Nashville Ave	Atmore, AL 36502
D - Bobby W. Sawyer	200 E Nashville Ave	Atmore, AL 36502
D - Chris Hornady	200 E Nashville Ave	Atmore, AL 36502
D - Eddie Tullis	200 E Nashville Ave	Atmore, AL 36502
D - Richard K. Maxwell	200 E Nashville Ave	Atmore, AL 36502
D - J. Carl Mixon	200 E Nashville Ave	Atmore, AL 36502
D - David Bagwell	200 E Nashville Ave	Atmore, AL 36502