

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002831

Entity Name: UNITED BANK

FILED  
Apr 24, 2012  
Secretary of State

**Current Principal Place of Business:**

200 EAST NASHVILLE AVENUE  
ATMORE, AL 36502

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 8  
ATMORE, AL 36502

**New Mailing Address:**

FEI Number: 63-0838750      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

**OFFICERS AND DIRECTORS:**

Title: PCEO  
Name: JONES, ROBERT R III  
Address: 200 EAST NASHVILLE AVENUE  
City-St-Zip: ATMORE, AL 36502

Title: DVC  
Name: ANDREOLI, MICHAEL R  
Address: 200 EAST NASHVILLE AVENUE  
City-St-Zip: ATMORE, AL 36502

Title: DC  
Name: SWIFT, DAVID D  
Address: 200 EAST NASHVILLE AVENUE  
City-St-Zip: ATMORE, AL 36502

Title: S  
Name: BROOKS, TINA N  
Address: 200 EAST NASHVILLE AVENUE  
City-St-Zip: ATMORE, AL 36502

Title: CFO  
Name: JONES, ALLEN O  
Address: 200 EAST NASHVILLE AVENUE  
City-St-Zip: ATMORE, AL 36502

Title: CTRL  
Name: JOHNSON, DALE  
Address: 200 EAST NASHVILLE AVENUE  
City-St-Zip: ATMORE, AL 36502

I hereby 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 all other like empowered.

SIGNATURE: TINA N BROOKS

SECR

04/24/2012

Electronic Signature of Signing Officer or Director

Date