

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005580

FILED
Feb 18, 2010
Secretary of State

Entity Name: CADENCE FINANCIAL CORPORATION

Current Principal Place of Business:

301 EAST MAIN STREET
STARKVILLE, MS 39759

New Principal Place of Business:

Current Mailing Address:

301 EAST MAIN STREET
STARKVILLE, MS 39759

New Mailing Address:

FEI Number: 64-0694775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: PCOO
Name: ABERNATHY, MARK A
Address: C/O 301 EAST MAIN STREET
City-St-Zip: STARKVILLE, MS 39759

Title: D
Name: ABERNATHY, MARK A
Address: C/O 301 EAST MAIN STREET
City-St-Zip: STARKVILLE, MS 39759

Title: EVPC
Name: HASTON, RICHARD
Address: C/O 301 EAST MAIN STREET
City-St-Zip: STARKVILLE, MS 39759

Title: S
Name: HASTON, RICHARD T
Address: C/O 301 EAST MAIN STREET
City-St-Zip: STARKVILLE, MS 39759

Title: D
Name: FOXWORTHY, H R
Address: C/O 301 EAST MAIN STREET
City-St-Zip: STARKVILLE, MS 39759

Title: D
Name: BYARS, DAVID
Address: C/O 301 EAST MAIN STREET
City-St-Zip: STARKVILLE, MS 39759

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: J. AUBREY ADAIR

SVP

02/18/2010

Electronic Signature of Signing Officer or Director

Date