

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F07759 (6)

1. Corporation Name

FORT BROOKE BANK



Principal Place of Business

Mailing Address

510 VONDERBURG DRIVE
BRANDON FL 33511
US

510 VONDERBURG DRIVE
BRANDON FL 33511
US

3. Date Incorporated or Qualified 12/04/1980	3a. Date of Last Report 02/14/1995
4. FEI Number 59-2041417	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of principal officer or registered agent, or both, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
CD	MILLER, THOMAS H.	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
616 W. BRANDON BLVD.		1.3 STREET ADDRESS	
BRANDON FL		1.4 CITY - ST - ZIP	
PD	EATMAN, RICHARD H.	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
510 VONDERBURG DRIVE		2.2 NAME	
BRANDON FL		2.3 STREET ADDRESS	
		2.4 CITY - ST - ZIP	
STD	ADAMS, JOHN D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
7209 ADAMO DR		3.2 NAME	
TAMPA FL		3.3 STREET ADDRESS	
		3.4 CITY - ST - ZIP	
D	BROWN, TOMMY W	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3010 N. 38TH		4.2 NAME	
TAMPA FL		4.3 STREET ADDRESS	
		4.4 CITY - ST - ZIP	
D	RAMPOLLO, SAM	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1107 RIVERHILLS DR		5.2 NAME	
TEMPLE TERRACE FL		5.3 STREET ADDRESS	
		5.4 CITY - ST - ZIP	
		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/96 (813) 685-2000

Date

Daytime Phone #

CR2E034 (12/95)