

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F93000005265 (4)

1. Corporation Name
FFLC BANCORP, INC.

Principal Place of Business
800 N. BOULEVARD W.
LEESBURG FL 34748

Mailing Address
P.O. BOX 490420
LEESBURG FL 34749-0420



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

11/18/1993

4. FEI Number

59-3204891

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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 607.1508, 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PCO
STREET ADDRESS KURTZ, STEPHEN T
CITY-ST-ZIP 800 NORTH BLVD., W.
LEESBURG FL 34748

TITLE ☐ DELETE
NAME VTD
STREET ADDRESS MUELLER, PAUL K
CITY-ST-ZIP 800 NORTH BLVD., W.
LEESBURG FL 34748

TITLE ☐ DELETE
NAME D
STREET ADDRESS LOGAN, JAMES P.
CITY-ST-ZIP 800 NORTH BLVD W
LEESBURG FL

TITLE ☒ DELETE
NAME D
STREET ADDRESS GREGG, JAMES R
CITY-ST-ZIP 800 NORTH BLVD., W.
LEESBURG FL 34748

TITLE ☐ DELETE
NAME D
STREET ADDRESS JUNOD, JOSEPH J
CITY-ST-ZIP 800 NORTH BLVD., W.
LEESBURG FL 34748

TITLE ☐ DELETE
NAME D
STREET ADDRESS WAGNER, CLARON D
CITY-ST-ZIP 800 NORTH BLVD., W.
LEESBURG FL 34748

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director ☐ Change ☒ Addition
1.2 NAME Ostrander, Ted R. Jr.
1.3 STREET ADDRESS 800 North Blvd., W.
1.4 CITY-ST-ZIP Leesburg, FL 34748

2.1 TITLE Director ☐ Change ☒ Addition
2.2 NAME H.D. Robuck, Jr.
2.3 STREET ADDRESS 800 North Blvd., W
2.4 CITY-ST-ZIP Leesburg, FL 34748

3.1 TITLE Secretary ☐ Change ☒ Addition
3.2 NAME Sandra L. Rutschow
3.3 STREET ADDRESS 800 North Blvd., W
3.4 CITY-ST-ZIP Leesburg, FL 34748

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

Paul K. Mueller

Paul K. Mueller 02/01/98 (252) 315-1676

CR2E034 (10/97)