

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G65006** (0)

1. Corporation Name

BARNETT BANK OF THE KEYS

Principal Place of Business

Mailing Address

**1010 KENNEDY DR
KEY WEST FL 33040**

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KEY WEST FL 33040**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/13/1983		3a. Date of Last Report 07/21/1995	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number 59-1349345		Applied For Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country		29. Country		30. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**WOOLLEY, HARRY JR
5 DRIFTWOOD TERRACE
KEY WEST FL 33040**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
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 reappointing.)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	1.1 TITLE	
NAME	SCHNELL, DON	1.2 NAME	
STREET ADDRESS	2520 PATTERSON AVENUE	1.3 STREET ADDRESS	
CITY - ST - ZIP	KEY WEST FL	1.4 CITY - ST - ZIP	
TITLE	SP	2.1 TITLE	
NAME	MONTGOMERY, JANET	2.2 NAME	
STREET ADDRESS	12 TAMARIND DRIVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	BIG COPPITT FL	2.4 CITY - ST - ZIP	
TITLE	VP	3.1 TITLE	
NAME	WOODALL, EDWARD	3.2 NAME	
STREET ADDRESS	2801 S ROOSEVELT BLVD	3.3 STREET ADDRESS	
CITY - ST - ZIP	KEY WEST FL	3.4 CITY - ST - ZIP	
TITLE	EVP	4.1 TITLE	
NAME	ROBINSON, TIM	4.2 NAME	
STREET ADDRESS	RT. 2 BOX 630 EAST	4.3 STREET ADDRESS	
CITY - ST - ZIP	SUMMERLAND KEY FL	4.4 CITY - ST - ZIP	
TITLE	VP	5.1 TITLE	
NAME	SCHILSOIN, JULIE	5.2 NAME	
STREET ADDRESS	3713 PEARLMAN COURT	5.3 STREET ADDRESS	
CITY - ST - ZIP	KEY WEST FL	5.4 CITY - ST - ZIP	
TITLE	SVP	6.1 TITLE	
NAME	NULL, RICHARD A.	6.2 NAME	
STREET ADDRESS	1613 BANAMA DRIVE	6.3 STREET ADDRESS	
CITY - ST - ZIP	KEY WEST FL	6.4 CITY - ST - ZIP	

14. I do 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **EDWARD WOODALL** *Edward Woodall* **6/6/96** **305 292 3804**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)