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CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **G94010**

(7)

95 JAN 19 AM 11:18

1. Corporation Name

FIRST STERLING BANCSHARES, INC.

Principal Place of Business

Mailing Address

C/O ROBERT W. STICKLER, JR.
3660 HAVENDALE BOULEVARD
WINTER HAVEN FL 33881

C/O ROBERT W. STICKLER, JR.
3660 HAVENDALE BOULEVARD
WINTER HAVEN FL 33881

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/28/1984

3a. Date of Last Report

02/08/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-2405633

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STICKLER, ROBERT W. JR.
218 SANTA ROSA DR.
WINTER HAVEN FL 33884

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 renewing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	MILLER, JERRY D.
STREET ADDRESS	140 SKYLAND DR.
CITY-ST-ZIP	LAKELAND FL
TITLE	D
NAME	GINGRICH, HERBERT O.
STREET ADDRESS	1051 SUGARTREE DR. S
CITY-ST-ZIP	LAKELAND FL
TITLE	D
NAME	PARKER, BRUCE L.
STREET ADDRESS	601 COUNTRY LANE NE
CITY-ST-ZIP	WINTER HAVEN FL
TITLE	D
NAME	JOHNSON, L. LEE
STREET ADDRESS	480 W. NORTH ECHO DR.
CITY-ST-ZIP	LAKE ALFRED FL
TITLE	D
NAME	CHRISTIAN, CECIL B.
STREET ADDRESS	2004 SHORELAND DR.
CITY-ST-ZIP	AUBURNDALE FL
TITLE	DO
NAME	STICKLER, JR., ROBERT W
STREET ADDRESS	218 SANTA ROSA DR
CITY-ST-ZIP	WINTER HAVEN FL

1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME	SEALE, J. JEFFREY	
1.3 STREET ADDRESS	1716 MARTHA DR.	
1.4 CITY-ST-ZIP	WINTER HAVEN FL	
2.1 TITLE	D	☐ Change ☒ Addition
2.2 NAME	STEPHENS, DONALD K.	
2.3 STREET ADDRESS	226 BIRCH LANE	
2.4 CITY-ST-ZIP	LAKELAND FL	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is a complete and accurate statement of the corporation's financial condition 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 its duly authorized agent or attorney-in-fact or duly empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if I am not an officer or director of the corporation.

Robert W. Stickler, Jr.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 11, 1995

813-965-2511