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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G94010 1. Corporation Name

(7)

FIRST COMMERCE BANKS OF FLORIDA, INC.

Principal Place	e of Business	Mailing Address					JOHN SIGN BINNI DI		1011 HOLL
41 CENTRAL A VINTER HAVEN			141 CENTRAL AVENUE EAST WINTER HAVEN FL 33880-6323						
						3. Date Incorporated or Qualified 03/28/1984	3a. Date of 02/09/1		port
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			plied For
Suite, Apt	# oto	Suite, Apt. #, etc.				59-2405633			t Applicable
2		27				5. Certificate of Status Desired		Fee Re	dditional quired
City & State	e e e e e e e e e e e e e e e e e e e	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	
Zip	Country	Zip	Соц	ntry		8. This corporation has liability for in			199.032,
4	25 29 29 9. Name and Address of Current Registered Ag		[30]			Florida Statutes Yes No 10. Name and Address of New Registered Agent			
OTIO		ii Hadisieleo Adeiii		81	Name	10. Name and Address of New Kel	Interest After	-	
	KLER, ROBERT W. JR. CENTRAL AVENUE EAST								
	TER HAVEN FL 33880			82	Street Addi	ress (P.O. Box Number is Not Acceptable	e)		
*****				В3					
			1	84	City		FL 8	S Zip C	ode
11. Pursuant	to the provisions of Sections 607.050)2 and 607 1508, Florida Statu	ites, the at	bove	-named corr	poration submits this statement for the pr	urpose of cha	inging its	s registered
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was ations of, Section 607,0505, F	authorize Iorida Stat	d by lutes	the corporat	tion's board of directors. I hereby accep	t the appointr	nent as	registered
SIGNATURE									
	Signative typed or printed name of registered age			1 Ager	nt signature requir	red when reinstating)	DATE	FOTOR	0.01.46
12.	OFFICERS AN	ID DIRECTORS	13.	TI C		ADDITIONS/CHANGES TO OFFIC		Change	S IN 12 Addition
TITLE NAME	MILLER, JERRY D.	Fit bereit	1.7 U					Change	Audition
STREET ADDRESS	140 SKYLAND DR.				ADDRESS				
CITY-ST-ZIP	LAKELAND FL		- 1	ITY-ST	1				
TITLE	D	DELETE	2.1 TI					Change	Addition
NAME	GINGRICH, HERBERT O.		2.2 N/	AME					
STREET ADDRESS	1051 SUGARTREE DR. S		2.3 \$1	REET	address				
CHTY-ST-ZIP	LAKELAND FL		2. 4 C	ITY-S	T-ZIP				
TITLE	D) DELETE						Change	Addition
NAME	SWAIN, BRIAN		3.2 N/	AME					i
STREET ADDRESS	9400 W LAKE RUBY DRIVE		3.3 S	REET	ADDRESS				
CITY - ST - ZIP	WINTER HAVEN FL	Dourte		ITY-S	T-ZIP	<u> </u>		AL	
TITLE	D TANDON MOV	DELETE	4.1 TI		İ		u	Change	Addition
NAME.	BRANDON, JACK		4. 2 N						
STREET ADDRESS	141 5TH STREET NW WINTER HAVEN FL				ADDRESS				
CITY-ST-ZIP TITLE	D D	DELETE	4.4 Ct	TY-ST	(- ZIP			Change	Addition
NAME	STEPHENS, JR J	My breeze	5.2 N/				ت	Unango	
STREET ADDRESS	43 LAKE LINK DRIVE SE				ADDRESS				
CiTY - ST - ZiP	WINTER HAVEN FL			IFY-81	1				ŀ
TITLE	DO	DELETE	6 1 T)					Сћапде	Addition
NAME	STICKLER, JR., ROBERT W		62 N	AME	1				
STREET ADDRESS	218 SANTA ROSA DR		63 S1	TAEET :	address				
CITY-S1-ZIP	WINTER HAVEN FL		64 C	ITY-SI	r-ziP				
14. I do herel	by certify that the information supplies	d with this filing does not qua	lify for the	exer	mption states	d in Section 119.07(3)(i), Florida Statutes	. I further cer	tify that i	the
l am an o appears i	fficer or director of the dorporation of in Block 12 or Block 13 if changer, o	r the receiver or trustee empor or on an attachment with an ac	wered to ed dress.	3X8CI	ute this repo	t my signature shall have the same lega rt as required by Chapter 607, Florida S	atutes; and th	nat my n	ame