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CORPORATION
ANNUAL REPORT

SIGNATURE: X



FLORIDA DEPARTMENT OF STATE

### Sandra B. Mortham

**FILED** 

Feb 11 1997 8:00am

Secretary of State

1-31-97

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # H96311

1. Corporation Name

(6)

SUNTRUST BANK, TAMPA BAY

NAME   MENTZER, CARL F   1.2 NAME	For slicable onal d Be
## C 4200 TAMPA FL 33602  ## Principal Place of Business   2a	For blicable onal d Be
TAMPA FL 38602  TAMPA FL 38601-3303  3. Date Incorporated or Qualified O1/27/1986 04/26/1998  2. Principal Place of Business 2.a. Mailing Address 4. FEI Number 59-2606830 Not Applied Not Applied Status Pepinder Status Pepi	For blicable onal d Be
2. Principal Place of Business 2. Adding Address 3. Date Incorporated or Qualified O1/27/1986 3. Date of Lest Repor O4/26/1998 4. FEI Number   Applies   App	For blicable onal d Be
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applies   25   26   59-2606830   Not App   26   Suite, Apt. #, etc.   Suite, Apt. #, etc.   27   City & State   Rection Campaign Financing   Added to Fe   21p	For blicable onal d Be
28 Mailing Address 4. FEI Number 59-2606930 Not Applied Suite, Apt. #, etc. 59-2606930 Not Applied Suite, Applied	onal d Be
Suite, Apt. #, etc.  Suite, Ap	onal d Be
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Sc. Certificate of Status Desired   \$8.75 Addit Fee Require   City & State   City & State   State	onal d Be
City & State Country Count	d Be s
City & State    City & State   City	8
Trust Fund Contribution Added to Fe Zip Country Zip Country B. This corporation has liability for intengible tax under s. 199 Florida Statutes SY Yes No  9. Name and Address of Current Registered Agent  MANN, THOMAS A II 401 E. JACKSON ST. 10TH FLOOR MAIL CODE 4103 TAMPA FL 33602  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  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 regoration of the corporation submits this statement for the purpose of changing its regoragent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN MENTEER ADDRESS CITY-S1-ZIP  13. STREET ADDRESS CITY-S1-ZIP  14. CITY-S1-ZIP  TAMPA FL 33802	8
Zip Country Zip Country Signature system of princing labeling for intangible tax under s. 198 Florida Statutes Signature required when reinstating)  2ip Country Signature system of 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 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, or both control and the state of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both control and the state of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both control and the state of Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN STREET ADDRESS  CITY-S1-ZIP  TAMPA FL 33802  14. CITY-S1-ZIP  8. This corporation has liability for intangible tax under s. 198 Florida Statutes and Statutes.  19. Name	032,
PART   25   29   30   Florida Statutes   X Yes   No   9. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent	
MANN, THOMAS A II 401 E. JACKSON ST. 10TH FLOOR MAIL CODE 4103 TAMPA FL 33602  82 Street Address (P.O. Box Number is Not Acceptable)  83 PL 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 reportice 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 IN DELETE 1.1 TITLE  MAME  MENTZER, CARL F  401 E JACKSON ST  TAMPA FL 33802  1.4 City  FL 85 Zip Code  (NOTE: Registered Agent signature required when reinstating)  DATE  1.2 NAME  1.3 STREET ADDRESS  CITY-ST-ZIP  1.4 CITY-ST-ZIP	
## 401 E. JACKSON ST. 10TH FLOOR MAIL CODE 4103 TAMPA FL 33602  ## City  ##	
401 E. JACKSON ST. 10TH FLOOR MAIL CODE 4103 TAMPA FL 33802  82 Street Address (P.O. Box Number is Not Acceptable)  83 FL	
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12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  TIFLE  CD  NAME  MENTZER, CARL F  STREET ADDRESS  401 E JACKSON ST  CITY-ST-ZIP  TAMPA FL 33802  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  1.1 TITLE  1.2 NAME  1.2 NAME  1.4 CITY-ST-ZIP	erea
DELETE   DELETE   1.1 TITLE   Change	
MENTZER, CARL F	Addition
STREET ADDRESS         401 E JACKSON ST         1.3 STREET ADDRESS           CITY-ST-ZIP         TAMPA FL 33802         1.4 CITY-ST-ZIP	Addition
CITY-ST-ZIP TAMPA FL 33802 1.4 CITY-ST-ZIP	
	A dalah
	Addition
NAME WILSEY, GEORGE F. 2.2 NAME	j
STREET ADDRESS 275 4TH ST. N. 2.3 STREET ADDRESS	
CITY-ST-ZIP ST. PETERSBURG FL 2.4 CITY-ST-ZIP	
The state of the s	Addition
NAME KUGELMANN, PETER 3.2 NAME	ļ
STREET ADDRESS 10319 RAINBRIDGE DR. 3.3 STREET ADDRESS	İ
CITY-ST-ZIP RIVERVIEW FL : 3.4. CITY-ST-ZIP	
THILE DELETE 4.1 TITLE Change	Addition
NAME 4.2 NAME	
STREET ADDRESS See attached 4.3 STREET ADDRESS	
CITY-ST-ZIP 4.4 CITY-ST-ZIP	
	Addition
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP 5.4 CITY-ST-ZIP	
	Addition
NAME 6.2 NAME	
1	
14. Lide became could that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i) Florida Statutes. I further certify that the	
information indicated on this appual report or supplemental angual report is true and accurate and that my signature shall have the same legal effect as if mage under	
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 3 if changed, or on an attachment with an address.	ath; that

压入规则证书

## SUNTRUST BANK, TAMPA BAY 12/31/96

### **OFFICERS:**

Carl F. Mentzer
Thomas G. Kuntz
Graham G. Anderson
Fred O. Dobbins
Paul J. Hanna
Kevin H. Kilgannon
Peter Kugelmann

Robert W. Olson

Adress for all officers:

Chairman and Chief Executive Officer
President and Chief Operating Officer
Executive Vice President
Executive Vice President
Executive Vice Pres./Sr. Trust Officer
Executive Vice President

Sr. Vice President/Cashier, Secretary Sr. Vice President/Chief Financial Officer

401 E. Jackson St., Tampa, FL 33602

### **DIRECTORS:**

Girard F. Anderson Dr. Peter H. Armacost James R. Harper Fred M. Hirons, III Theodore J. Hoepner Richard Korpan Thomas G. Kuntz Walter I. Larson Carl F. Mentzer, Chairman

James L. Redman
Lance C. Ringhaver
Bruce A. Samson
Harry E. Teasley, Jr.
J. Hulon Williams, III
George F. Wilsey

Address for all directors:

401 E. Jackson St., Tampa, FL 33602