

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # H98216 (5)
1. Corporation Name
INDIAN ROCKS STATE BANK



Principal Place of Business: **12360 INDIAN ROCKS ROAD LARGO FL 34644**
Mailing Address: **12360 INDIAN ROCKS ROAD LARGO FL 34644**

3. Date Incorporated or Qualified: **02/04/1986**
3a. Date of Last Report: **03/09/1995**
4. FEI Number: **59-2567960**
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

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30
Suite, Apt. #, etc.
City & State
Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NAME OF AGENT REMAINS THE SAME

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: **FL**

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) DATE: _____ (NOTE: Registered Agent's signature required when reappointing)

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	JONASSEN, WILLIAM S.
STREET ADDRESS	165 ULMERTON RD. SW
CITY - ST - ZIP	LARGO FL
TITLE	D <input type="checkbox"/> DELETE
NAME	MITCHELL, DUKE L.
STREET ADDRESS	11321 HARMONY CT.
CITY - ST - ZIP	LARGO FL
TITLE	D <input type="checkbox"/> DELETE
NAME	PETRO, CLOYD A.
STREET ADDRESS	200 DRIFTWOOD LN.
CITY - ST - ZIP	LARGO FL
TITLE	VCB <input type="checkbox"/> DELETE
NAME	ROBERTS, CHARLES R.
STREET ADDRESS	10412 SOVEREIGN DR.
CITY - ST - ZIP	LARGO FL
TITLE	D <input type="checkbox"/> DELETE
NAME	TAYLOR, J. ERIC, JR.
STREET ADDRESS	2985 ELYSIUM WAY
CITY - ST - ZIP	CLEARWATER FL
TITLE	D <input type="checkbox"/> DELETE
NAME	TONG, ROBERT T.
STREET ADDRESS	11580 OAKHURST RD.
CITY - ST - ZIP	LARGO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *George F. Roman Jr.* 3-22-96 (813) 596 9990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE TIME PHONE #
VICE PRES. & CASHIER

CR2E034 (12/95)

NAME OF OFFICERS AND DIRECTORS

STREET ADDRESS OF EACH

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CITY AND STATE

UPMEYER, ERNST A.
DIRECTOR EMERITUS

H78216

50 Harbor View Lane, #28

Belleair Bluffs, FL
34640

WARD, HAROLD M. CHAIRMAN/BD

2300 Wellesley Road

Clearwater, Florida
34624

WASSON, O. LEE
SENIOR VICE PRESIDENT
DIRECTOR

12415 Chickawaw Trail

Largo, Florida 34644

GEORGE, ROBERT C.,
PRESIDENT AND CEO
DIRECTOR

9699 125th Street N.

Seminole, FL 34642

OFFICERS

AUDREY L. ZEMAN (FORMERLY ASHPAUGH)
ASSISTANT VICE PRESIDENT & BR. MGR.

26 Pindo Palm E.

Largo, FL 34640

GEORGE F. BOSSA, JR.
VICE PRESIDENT AND CASHIER

8686 124th Way N.

Seminole, FL 34642

BERNIE F. KLINE
Senior Vice President

8165 Bayhaven Drive

Seminole, FL 34646

PHYLLIS B. KRUEGER
Auditor

1665 21st Street S.W.

Largo, FL 34644

TERI M. DOWNEN
Loan Operations Officer

13833 Dominica Drive

Largo, FL 34646

EVELYN A. OVERTON
Assistant to the President

14021 90th Place N.

Largo, FL 34646

CHRIS M. GILMAN
Assistant Vice President &
Branch Manager

11474 81st Avenue N.

Seminole, FL 34642

KELLY D. SIVELS
Assistant Cashier

12900 131st Street N., A-205

LARGO, FL 34644

KIMBERLY R. GREENE
Assistant Cashier

12261 Eldon Drive

LARGO, FL 34644