

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 10 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham, Secretary of State DIVISION OF CORPORATIONS
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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 33774-3003
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3. Date Incorporated or Qualified 02/04/1986	3a. Date of Last Report 03/28/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	4. FEI Number 59-2567960 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

**GEORGE F. BOSSA, JR., VICE PRESIDENT AND
CASHIER
8686 124th Way N.
Seminole, Florida 33772**

10. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	JONASSEN, WILLIAM S.			1.2 NAME			
STREET ADDRESS	165 ULMERTON RD. SW			1.3 STREET ADDRESS			
CITY-ST-ZIP	LARGO FL			1.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	MITCHELL, DUKE L.			2.2 NAME			
STREET ADDRESS	11321 HARMONY CT.			2.3 STREET ADDRESS			
CITY-ST-ZIP	LARGO FL			2.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	PETRO, CLOYD A.			3.2 NAME			
STREET ADDRESS	200 DRIFTWOOD LN.			3.3 STREET ADDRESS			
CITY-ST-ZIP	LARGO FL			3.4 CITY-ST-ZIP			
TITLE	VCB	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	ROBERTS, CHARLES R.			4.2 NAME			
STREET ADDRESS	10412 SOVEREIGN DR.			4.3 STREET ADDRESS			
CITY-ST-ZIP	LARGO FL			4.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		5.1 TITLE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	TAYLOR, J. ERIC, JR.			5.2 NAME			
STREET ADDRESS	2985 ELYSIUM WAY			5.3 STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL			5.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	TONG, ROBERT T.			6.2 NAME			
STREET ADDRESS	11580 OAKHURST RD.			6.3 STREET ADDRESS			
CITY-ST-ZIP	LARGO FL			6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CR2E034 (9/96)