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FILED
Jun 03 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 # J01263 (9)
 1. Corporation Name
CITIZENS BANK & TRUST



Principal Place of Business 1150 CLEVELAND STREET CLEARWATER FL 34615 US	Mailing Address P. O. BOX 539 CLEARWATER FL 34617-0539 US
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29

3. Date Incorporated or Qualified 02/21/1986	3a. Date of Last Report 05/01/1996
4. FEI Number 59-2537667	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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**STAFFORD, VICTORIA
 1150 CLEVELAND STREET
 CLEARWATER FL 34615**

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

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARLEY, C. DAVID, JR.	1.2 NAME	
STREET ADDRESS	783 HARBOR ISLAND	1.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STONE, DAVID P.	2.2 NAME	
STREET ADDRESS	2954 LANDMARK WAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOMSTEIN, ALAN C.	3.2 NAME	
STREET ADDRESS	1015 VICTORIA DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOUCHARD, ROGER O.	4.2 NAME	
STREET ADDRESS	1560 CHUKAR RIDGE	4.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR FL 34615	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CROWN, WILLIAM C., III	5.2 NAME	
STREET ADDRESS	894 ISLAND WAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENGELHARDT, DANIEL	6.2 NAME	
STREET ADDRESS	1780 SANTA BARBARA DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN 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.

SIGNATURE _____ DATE _____

CR2E034 (9/96)

12. continued - Citizens Bank & Trust

Title	D
Name	BANKS, ROBERT J.
Address	9912 WINDTREE BLVD.
City-St-Zip	SEMINOLE, FL 34642
Title	D
Name	CANTONIS, JAMES M.
Address	305 ORLANDO RD.
City-St-Zip	BELLEAIR, FL 34616
Title	D
Name	HALE, WILLIAM E., M.D.
Address	2307 JONES CT.
City-St-Zip	DUNEDIN, FL 34698
Title	D
Name	POPE, F. WALLACE, JR.
Address	911 CHESTNUT ST.
City-St-Zip	CLEARWATER, FL 34615
Title	D
Name	ROGERO, ALBERT L., JR.
Address	1985 SEVER DRIVE
City-St-Zip	CLEARWATER, FL 34624
Title	V
Name	BERNADINO, ROBERT
Address	8548 12TH WAY N.
City-St-Zip	ST. PETERSBURG, FL 33702
Title	O
Name	CATALANO, WALTER
Address	6965 21ST ST. N.
City-St-Zip	ST. PETERSBURG, FL 33702
Title	V
Name	DOWNING, RITA
Address	3205 WESSEX WAY
City-St-Zip	CLEARWATER, FL 34621
Title	V
Name	ELLENOR, KIM M.
Address	1580 CUMBERLAND CT. E.
City-St-Zip	PALM HARBOR, FL 34683
Title	O
Name	FEJZULI, PHYLLIS
Address	14 EAGLE LANE
City-St-Zip	PALM HARBOR, FL 34683

Title SR. VP
Name GRAY, GARY S.
Address 1865 BUGLE LANE
City-St-Zip CLEARWATER, FL 34624

Title EVP
Name S. RACINE HALL
Address 1810 BRENTWOOD DR.
City-St-Zip CLEARWATER, FL 34624

Title V
Name JEFFERIES, STEPHEN M.
Address 1414 BENTLEY ST.
City-St-Zip CLEARWATER, FL 34615

Title O
Name JORGE, NANCY
Address 4483 PLUMOSA ST.
City-St-Zip SPRING HILL, FL 34607

Title O
Name KEREKES, JOSEPH A.
Address 1694 OAK PLACE
City-St-Zip CLEARWATER, FL 34615

Title O
Name LAGUEUX, JUNE
Address 208 NAUTILUS WAY
City-St-Zip TREASURE ISLAND, FL 33706

Title O
Name McCORMICK, KRISTINE
Address 1361 TURNER ST.
City-St-Zip CLEARWATER, FL 34616

Title O
Name MOSES, JUDY
Address 1848 EMORY DR.
City-St-Zip CLEARWATER, FL 34625

Title O
Name REPPER, WILLIAM
Address 3268 SAN MATEO ST.
City-St-Zip CLEARWATER, FL 34619

Title O
Name SCHNUR, KELLEY J.
Address 3109 GLENWOOD CT.
City-St-Zip SAFETY HARBOR, FL 34695

Title V
Name SCHUTTE', LANA L.
Address 107 WINDWARD ISLAND
City-St-Zip CLEARWATER, FL 34630

Title SR. VP
Name STAFFORD, VICTORIA
Address 10' PINEWINDS BLVD.
City-St-Zip OLDSMAR, FL 34677

Title O
Name TOSCANO, KAY
Address 5720 REDHAWK DR.
City-St-Zip NEW PORT RICHEY, FL 34665

Title O
Name WADE, CHERYL
Address 908 PENNSYLVANIA AVE.
City-St-Zip CLEARWATER, FL 34615

Title O
Name WALSH, MARY ELLEN
Address 1349 BRUNSWICK DR.
City-St-Zip CLEARWATER, FL 34616

Title V
Name WILLIAMSON, LOIS
Address 17000 PATERSON RD. B-7
City-St-Zip ODESSA, FL 33556

Title O
Name WINTER, BRENDA
Address 4028 DOVER DR. E.
City-St-Zip BRADENTON, FL 34203

Title SR. VP
Name YOUNGS, GERALD
Address 3165 LANDMARK DR. #725
City-St-Zip CLEARWATER, FL 34621

O = OFFICER