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

FILED Apr 15 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (8)J65566 THE HERNANDO COUNTY BANK Principal Place of Business Mailing Address 1187 S BROAD ST 1187 S BROAD ST PO BOX 10289 PO BOX 10289 DO NOT WRITE IN THIS SPACE BROOKSVILLE FL 34601-0111 BROOKSVILLE FL 34601-0111 3. Date Incorporated or Qualified 04/02/1987 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-2834272 Not Applicable Suite Ant # etc Suite Apt # etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes Yes 25 24 20 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent NOT REQUIRED **PURSUANT TO FLORIDA STATUTES** Street Address (P.O. Box Number is Not Acceptable) CHAPTER 607.034(2) 83 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ■ DELETE 1.1 TITLE Change Addition BRANNEN, JOSEPH S. NAME 12 NAME 8394 E GULF TO LAKE HWY STREET ADDRESS 1.3 STREET ADDRESS INVERNESS FL CHY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITL F 2.1 TITLE OSWALD H. WAYNE NAME 2.2 NAME 1380 S. WATERVIEW DR STREET ADORESS 2.3 STREET ADDRESS INVERNESS FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE DUMAS, BROWN, JR. NAME 3.2 NAME 291 S. GARDENIA TERR STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP CRYSTAL RIVER FL 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE BRANNEN II, GEORGE H NAME 4, 2 NAME 3300 \$ PLEASANT GROVE RD STREET ADDRESS 4.3 STREET ADDRESS **INVERNESS FL** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE SHEFFIELD, CHARLES G. NAME 5.2 NAME STREET ADDRESS 9848 DOMINGO DRIVE 5.3 STREET ADDRESS **BROOKSYILLE FL** CITY-ST-ZIP 5.4 CITY-ST-ZIP

14. I 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 of 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, oppor an attachment with an address.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

DELETE

SIGNATURE:

TITLE

NAME

STREET ADDRESS

April 10, 1998 352-799-2265

Change

Addition