FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 28 PM 3:50

DOCUMENT # J69169 (7)

1. Corporation Name
TRI-COUNTY BANK

Principal Place of Business	Mailing Address
302 MAIN STREET P.O. BOX 797 TRENTON FL 32693-0797	302 MAIN STREET P.O. BOX 797 TRENTON FL 32693-0797

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/24/1987
3a. Date of Last Report: 02/25/1994

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-2766270 ☐ 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

9. Name and Address of Current Registered Agent

NOT REQUIRED PURSUANT TO S. 607.034(2) FLORIDA STATUTES

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	Chairman/ Director	☐ Change ☒ Addition
NAME	BUSH, WILBUR	1.2 NAME	A.B. Grandoff Sr.	
STREET ADDRESS	402 S.W. 5TH AVE.	1.3 STREET ADDRESS	HWY. 339	
CITY-ST-ZIP	TRENTON FL	1.4 CITY-ST-ZIP	Trenton, FL 32693	
TITLE	PD	2.1 TITLE	Director	☐ Change ☒ Addition
NAME	FERGUSON, JOHN	2.2 NAME	Evelyn Grandoff	
STREET ADDRESS	SHADY GRV BPT CHRCH RD.	2.3 STREET ADDRESS	HWY. 339	
CITY-ST-ZIP	TRENTON FL	2.4 CITY-ST-ZIP	Trenton, FL 32693	
TITLE	D	3.1 TITLE	Director	☐ Change ☒ Addition
NAME	HAYES, MICHAEL	3.2 NAME	Charles W. Perez Jr.	
STREET ADDRESS	STATE ROAD 129	3.3 STREET ADDRESS	101 Spring Ridge Lane	
CITY-ST-ZIP	BELL FL	3.4 CITY-ST-ZIP	Thomasville, GA 31792-9804	
TITLE	D	4.1 TITLE	Director/ Vice President	☐ Change ☒ Addition
NAME	SCOGGINS, NORMAN	4.2 NAME	Donna Graham	
STREET ADDRESS	COUNTY RD. 320	4.3 STREET ADDRESS	CR 345	
CITY-ST-ZIP	CHIEFLND FL	4.4 CITY-ST-ZIP	Chiefland, FL 32626	
TITLE	VP	5.1 TITLE	Director	☐ Change ☒ Addition
NAME	HILLIARD, SANDI	5.2 NAME	Howard McKinney	
STREET ADDRESS	COUNTY RD. 341	5.3 STREET ADDRESS	3926 NW 25th Circle	
CITY-ST-ZIP	BELL FL	5.4 CITY-ST-ZIP	Gainesville, FL 32606	
TITLE	O	6.1 TITLE	Assistant Cashier	☐ Change ☒ Addition
NAME	DUNN, MARY	6.2 NAME	Karol Lindsey	
STREET ADDRESS	COUNTY RD 321	6.3 STREET ADDRESS	County Road 344	
CITY-ST-ZIP	TRENTON FL	6.4 CITY-ST-ZIP	Bell, FL 32619	

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)(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: Sandi Hilliard 2/24/95 904 463 7171
SIGNATURE AND TYPED OR PRINTED NAME OF MORNG OFFICER OR DIRECTOR — Date — Daytime Phone #

041079 FP