

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

FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # **J75267** (1)
1. Corporation Name
C & L BANK OF BLOUNTSTOWN



Principal Place of Business 307 W CENTRAL AVE PO BOX 534 BLOUNTSTOWN FL 32424-1803	Mailing Address 307 W CENTRAL AVE PO BOX 534 BLOUNTSTOWN FL 32424-1803
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 06/01/1987	4. FEI Number 59-2816601 Applied For Not Applicable	5. Certificate of Status Desired <input checked="" 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
---	--	--	---	--	---	--

9. Name and Address of Current Registered Agent

**HOWELL, BERT
307 W CENTRAL AVENUE
P. O. BOX 534
BLOUNTSTOWN, FL 32424**

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 in printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

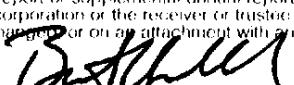
OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
D	WEAVER, JAMES W JR.	HWY 12 S	BRISTON FL	
D	DAVIS, DOUGLAS R., JR.	LAKE MYSTIC RD.	BRISTOL FL	
D	SMITH, JERRY M.	3426 CREEK DRIVE WEST	ALACHUA FL	
DPC	HOWELL, BERT	307 W CENTRAL AVE	BLOUNTSTOWN FL	
D	REVELL, GORDON P.	HWY. 12 SOUTH	BRISTOL FL	
VCD	WEAVER, JAMES W. SR.	HWY. 12 SOUTH	BRISTOL FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
CD	Cayson, A. Gerald	Hwy 20 E.	Blountstown, FL 32424	
VCD	Weaver, James W. Jr.	Hwy 12 S	Bristol, FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D	Weaver, James W. Sr	Hwy 12 South	Bristol, FL 32321	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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:



Bert Howell

850-674-5900

CR2E034 (10/97)