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Jan 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J82984

(2)

1. Corporation Name

FIRST CENTRAL BANK

Principal Place of Business

5858 CENTRAL AVENUE
PO BOX 41250
ST. PETERSBURG FL 33743-1250

Mailing Address

5858 CENTRAL AVENUE
PO BOX 41250
ST. PETERSBURG FL 33743-1250



3. Date Incorporated or Qualified

04/05/1988

3a. Date of Last Report

04/16/1996

4. FEI Number

59-2853820

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

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

Signature type: If printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

D
JOSLIN, TIMOTHY J.
7864 9TH AVE., NORTH
ST. PETERSBURG FL

TITLE NAME ☐ DELETE

D
CLARK, ROBERT P.
3901 13TH WAY NE
ST. PETERSBURG FL

TITLE NAME ☐ DELETE

DPC
CRAWFORD, E. RALPH
536 HAVEN POINT DR.
TREASURE ISLAND FL

TITLE NAME ☐ DELETE

D
MILLER, IRWIN
2621 E VINA DELMAR
ST PETERSBURG FL

TITLE NAME ☐ DELETE

D
BENJAMIN, PHILIP
6850 SUNSET WAY, APT. 419
ST. PETERSBURG BCH. FL 33706

TITLE NAME ☐ DELETE

V
SEDGWICK, LORRAINE
10342 JENNIFER CT
LARGO FL 34648

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP ☐ Change ☒ Addition

D
MARK BENJAMIN
23 SUNSET WAY DR
DELBAIR, FL 34616

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP ☐ Change ☒ Addition

D
CRAIG SHER
9055 BAYWOOD PARK DR.
SEMINOLE FL 34646

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ☐ Change ☒ Addition

V
KERRY WESTBROOK
8123-127 ST.
SEMINOLE FL 34646

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP ☐ Change ☒ Addition

SVF
LAWRENCE FLOYD
255-21 AVE N.E.
ST. PETERSBURG FL 33704

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP ☐ Change ☒ Addition

SVF
SCOTT C. BOYLE
2055- HAWAII AVE N.E.
ST. PETERSBURG FL 33703

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/97

813
347-0197

CR2E034 (9/96)