

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 14 PM 12:03

DOCUMENT # J83016

(2)

1. Corporation Name

INDEPENDENT BANK OF OCALA

Principal Place of Business

60 SOUTHWEST 17TH STREET
BOX 2900
OCALA FL 32678

Mailing Address

60 SOUTHWEST 17TH STREET
BOX 2900
OCALA FL 32678

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/24/1987

3a. Date of Last Report

04/11/1994

4. FEI Number

59-2856255

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NOT REQUIRED PURSUANT
TO CHAPTER 607.034 (2)
FLORIDA STATUTES FL

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

ETHERIDGE, FRANK R.

STREET ADDRESS

17 SOUTH WESTMORELAND DR.

CITY-ST-ZIP

ORLANDO FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

803 Lake Adair Blvd.N.
Orlando, FL 32804

☒ Change ☐ Addition

TITLE

D

NAME

DETERS, CHARLES H.

STREET ADDRESS

2701 TURKEYFOOT RD.

CITY-ST-ZIP

COVINGTON KY

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

D

NAME

MCCLELLAN, WILLIAM B.

STREET ADDRESS

1807 S.E. 8TH ST.

CITY-ST-ZIP

OCALA FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

CD

NAME

GADD, BILLY G.

STREET ADDRESS

1147 S.E. 14TH ST.

CITY-ST-ZIP

OCALA FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

D

NAME

TUTEN, J. LAMAR

STREET ADDRESS

1808 S.E. 7TH ST.

CITY-ST-ZIP

OCALA FL

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

SEVP

NAME

RICHELL, BRADLEY E. -- no longer with the

STREET ADDRESS

1401 S.W. 23RD PL.

CITY-ST-ZIP

OCALA FL

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

EVP/Cashier
Hunt, John R.
1601 S.W. 27th Ave.#2901
Ocala, FL 34474

☒ Change ☐ Addition

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)(b), 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:

John R. Hunt JOHN R. HUNT

4/9/95 (904) 644-2377

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

TELEPHONE NUMBER

STATE OF FLORIDA
CORPORATION ANNUAL REPORT
1995
INDEPENDENT BANK OF OCALA

#12. continued:

Title	D
Name	Grubbs, Claude R.
Street Address	4110 S.E. 5th St.
City-St-Zip	Ocala, FL 34471
Title	D/President
Name	Ellinor, Robert A.
Street Address	1911 Twin Bridge Circle
City-St-Zip	Ocala, FL 34471
Title	D
Name	Peterson, John L.
Street Address	4747 S.W. 60th Ave.
City-St-Zip	Ocala, FL 34481
Title	D
Name	Webb, Michael J.
Street Address	2415 S.E. 13th St.
City-St-Zip	Ocala, FL 34471
Title	D
Name	Slaughter, Lanford T.
Street Address	44 S.E. 16th Ave.
City-St-Zip	Ocala, FL 34480