

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

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

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, 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

3. Date Incorporated or Qualified

12/24/1987

3a. Date of Last Report

02/14/1995

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

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 of Registered Agent required when changing)

(NOTE: Registered Agent Signature required when renewing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME: D
ETHERIDGE, FRANK R.
STREET ADDRESS: 803 LAKE ADAIR BLVD. N.
CITY-STATE-ZIP: ORLANDO FL

TITLE ☐ DELETE

NAME: D
DETERS, CHARLES H.
STREET ADDRESS: 2701 TURKEYFOOT RD.
CITY-STATE-ZIP: COVINGTON KY

TITLE ☐ DELETE

NAME: D
MCCLELLAN, WILLIAM B.
STREET ADDRESS: 1807 S.E. 8TH ST.
CITY-STATE-ZIP: OCALA FL

TITLE ☐ DELETE

NAME: CD
GADD, BILLY G.
STREET ADDRESS: 1147 S.E. 14TH ST.
CITY-STATE-ZIP: OCALA FL

TITLE ☐ DELETE

NAME: D
TUTEN, J. LAMAR
STREET ADDRESS: 1808 S.E. 7TH ST.
CITY-STATE-ZIP: OCALA FL

TITLE ☐ DELETE

NAME: EVPC
HUNT, JOHN R.
STREET ADDRESS: 1601 S. W. 27TH AVE. #2901
CITY-STATE-ZIP: OCALA FL

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

8201 S.E. 7th Ave. Rd.

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)(k), 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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(352)622-2377

Ex-14

Signature Plate #

CR2E034 (12/95)

STATE OF FLORIDA
CORPORATION ANNUAL REPORT
1996
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