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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J87283 (4)

1. Corporation Name

RIHERD BANK HOLDING COMPANY



Principal Place of Business

Mailing Address

300 WEST MAIN STREET
~~205 WEST MAIN STREET~~
LAKE BUTLER FL 32054
US

300 P. O. BOX 358
~~300 WEST MAIN STREET~~
LAKE BUTLER FL 32054
US

3. Date Incorporated or Qualified

08/11/1987

3a. Date of Last Report

01/19/1995

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

9. Name and Address of Current Registered Agent

RIHERD, THOMAS M. II
300 WEST MAIN STREET
LAKE BUTLER FL 32054

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, 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 ☐ DELETE

NAME
COP
RIHERD, PAUL M.
STREET ADDRESS
311 N.E. 2ND ST
CITY-ST-ZIP
LAKE BUTLER FL

TITLE ☐ DELETE

NAME
VDS
RIHERD, MARTHA C.
STREET ADDRESS
311 N.E. 2ND ST
CITY-ST-ZIP
LAKE BUTLER FL

TITLE ☒ DELETE

NAME
D
WHITE, FRANCES R.
STREET ADDRESS
380 S.LAKE AVE
CITY-ST-ZIP
LAKE BUTLER FL

TITLE ☒ DELETE

NAME
D
MAINES, HAL Y.
STREET ADDRESS
30 E. MAIN ST.
CITY-ST-ZIP
LAKE BUTLER FL

TITLE ☐ DELETE

NAME
DV
RIHERD, THOMAS M
STREET ADDRESS
RR. 3 BOX 1543H
CITY-ST-ZIP
LAKE BUTLER FL

TITLE ☐ DELETE

NAME
D
DRIGGERS, ROBERT A.
STREET ADDRESS
250 N.W. 3RD ST
CITY-ST-ZIP
LAKE BUTLER FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

Thomas M. Riherd II, Vice President

SIGNATURE:

Thomas M. Riherd II

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-96

(904) 496-2101

Date

Daytime Phone #

CR2E034 (12/95)