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Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K02565** (5)

1. Corporation Name
INDEPENDENT BANCSHARES, INC.

Principal Place of Business

60 S.W. 17TH STREET
P.O. BOX 2900
OCALA FL 32678

Mailing Address

60 S.W. 17TH STREET
P.O. BOX 2900
OCALA FL 32678



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/12/1987	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2869407	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
HUNT, JOHN R 8201 SE 7TH AVE RD OCALA FL 34480		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 <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GADD, BILLY G	1.2 NAME	
STREET ADDRESS	1147 SE 14TH ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL 34471	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DETERS, CHARLES H.	2.2 NAME	
STREET ADDRESS	2701 TURKEYFOOT RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	COVINGTON KY	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ETHERIDGE, FRANK R.	3.2 NAME	
STREET ADDRESS	803 LAKE ADAIR BLVD N	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TUTEN, J. LAMAR	4.2 NAME	
STREET ADDRESS	1808 S. E. 7TH ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SLAUGHTER, LANDFORD T. DR	5.2 NAME	
STREET ADDRESS	44 S.E. 16TH AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL	5.4 CITY-ST-ZIP	
TITLE	DP <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELLINOR, ROBERT A	6.2 NAME	
STREET ADDRESS	1911 TWIN BRIDGE CIRCLE	6.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL	6.4 CITY-ST-ZIP	

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:

[Signature]

REQUIRED

1/27/98

CR2E034 (10/97)

Florida Department of State:

1998 Profit Corporation Annual Report Packet cont:
INDEPENDENT BANCSHARES, INC.

#12. Continued.....

D
Grubbs, Claude R.
23660 NE 124th Pl.
Salt Springs, FL 32134

D
Peterson, John L.
4747 S.W. 60th Ave.
Ocala, FL 34481

D
Webb, Michael J.
2415 S.E. 13th Street
Ocala, FL 34471

D
McClellan, William B.
1729 S.E. 27th Loop
Ocala, FL 34471

Address change