

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB 21 AM 11:33

DOCUMENT # K07873 (8)

1. Corporation Name
FBC HOLDING COMPANY, INC.

Principal Place of Business
**% MARLAND D. WORDELL
361 N. MAIN ST.
CRESTVIEW FL 32536**

Mailing Address
**% MARLAND D. WORDELL
361 N. MAIN ST.
CRESTVIEW FL 32536**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
12/18/1987

3a. Date of Last Report
04/05/1994

4. FEI Number
59-2883727

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

2a. Mailing Address
26

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

City & State
23

City & State
28

Zip
24

Country
25

Zip
29

Country
30

9. Name and Address of Current Registered Agent

**WORDELL, MARLAND D.
361 N. MAIN ST.
CRESTVIEW FL 32536**

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 fee if applicable.

(NOTE: Registered Agent signature required when changing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
D

NAME
LABRIE, MARY ANN MCLEOD

STREET ADDRESS
3637 ROLLING LN CR.

CITY-ST-ZIP
MIDWEST CITY OK

TITLE
D

NAME
CLEMMONS, ALEX H.

STREET ADDRESS
311 POWELL DR.

CITY-ST-ZIP
CRESTVIEW FL

TITLE
CD

NAME
WORDELL, MARLAND D.

STREET ADDRESS
198 WEDGEWOOD LN.

CITY-ST-ZIP
CRESTVIEW FL

TITLE
VS

NAME
MADDEN, PATSY J.

STREET ADDRESS
2282 MADDEN CIRCLE

CITY-ST-ZIP
BAKER FL

TITLE
V

NAME
RICE, DALE E. J

STREET ADDRESS
222 SKYLINE CIRCLE

CITY-ST-ZIP
CRESTVIEW FL

TITLE
V

NAME
HARTZOG, PENNIE B.

STREET ADDRESS
6148 BEASLEY ROAD

CITY-ST-ZIP
CRESTVIEW FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
D ☐ Change ☒ Addition

1.2 NAME
Fleming, J. B.

1.3 STREET ADDRESS
6064 Blueberry Ln

1.4 CITY-ST-ZIP
CRESTVIEW FL 32536

2.1 TITLE
D ☐ Change ☒ Addition

2.2 NAME
Tew, Gordon

2.3 STREET ADDRESS
3096 Colonial Circle

2.4 CITY-ST-ZIP
CRESTVIEW FL 32536

3.1 TITLE
D ☐ Change ☒ Addition

3.2 NAME
Fountain, John E.

3.3 STREET ADDRESS
151 Gillis Dr

3.4 CITY-ST-ZIP
CRESTVIEW FL 32536

4.1 TITLE
D ☐ Change ☒ Addition

4.2 NAME
Townsend, Sam F.

4.3 STREET ADDRESS
4840 S. Ferdon Blvd

4.4 CITY-ST-ZIP
CRESTVIEW FL 32536

5.1 TITLE
D ☐ Change ☒ Addition

5.2 NAME
McDonald, William T.

5.3 STREET ADDRESS
319 Yacht Club Dr

5.4 CITY-ST-ZIP
FT WALTON BEACH FL 32548

6.1 TITLE
D ☐ Change ☒ Addition

6.2 NAME
Smith, Rodney R.

6.3 STREET ADDRESS
214 Skyline Dr

6.4 CITY-ST-ZIP
CRESTVIEW FL 32536

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 110.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PATSY MADDEN

2-16-95

904-682-2297

Date

Telephone

Attachment to Item 13.

Additions

Title: D
Name: Rice, Dale E. Sr.
Street Address: 1544 Texas Parkway
City-St-Zip: Crestview FL 32536

Title: D
Name: Saxon, R. Michael
Street Address: 5475 Champions SR
City-St-Zip: Pace FL 32571

Title: D
Name: Muller, Clair M.
Street Address: 2903 Wyngate Rd NW
City-St-Zip: Atlanta GA 30305