

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Mar 03 1997 8:00 am  
Secretary of State

DOCUMENT # L68519

(2)

1. Corporation Name

CNB FINANCIAL CORPORATION

Principal Place of Business

950 W. VENTURA AVE.  
CLEWISTON FL 33440  
US

Mailing Address

950 W. VENTURA AVE.  
CLEWISTON FL 33440-3412  
US



3. Date Incorporated or Qualified

04/25/1990

3a. Date of Last Report

02/16/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

65-0184468

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

9. Name and Address of Current Registered Agent

BOY, JOHN B JR.  
950 W. VENTURA AVE.  
CLEWISTON FL 33440

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

500002101965

-03/03/97--01026--012

\*\*\*173.75

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 file 4 applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME BOY, JOHN B. JR.  
STREET ADDRESS 401 SOUTH W.C. OWENS AVE.  
CITY-ST-ZIP CLEWISTON FL

TITLE D ☐ DELETE  
NAME SMITH, THOMAS A.  
STREET ADDRESS CORNER HIGHWAY 80 & 80-A  
CITY-ST-ZIP LABELLE FL

TITLE D ☐ DELETE  
NAME CORBIN, JOHN G.  
STREET ADDRESS 119 W. ESPERANZA  
CITY-ST-ZIP CLEWISTON FL

TITLE D/C ☐ DELETE  
NAME FRY, CURTIS S.  
STREET ADDRESS 111 SAN BENITO  
CITY-ST-ZIP CLEWISTON FL

TITLE D ☐ DELETE  
NAME PAIGE, BOBBY  
STREET ADDRESS RT. 1 BOX 101-T  
CITY-ST-ZIP CLEWISTON FL

TITLE D ☐ DELETE  
NAME MCCARTHY, DAN  
STREET ADDRESS P.O. BOX 188  
CITY-ST-ZIP CLEWISTON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE D ☐ Change ☒ Addition  
12 NAME Hancock, William  
13 STREET ADDRESS RT 2 Box 1210  
14 CITY-ST-ZIP Clewiston, FL 33440

21 TITLE D ☐ Change ☒ Addition  
22 NAME Howard, Robert  
23 STREET ADDRESS PO Box 1500  
24 CITY-ST-ZIP LaBelle, FL 33935

31 TITLE D/P ☐ Change ☒ Addition  
32 NAME Holmes, John H.  
33 STREET ADDRESS 101 Ridgewood Ave.  
34 CITY-ST-ZIP Clewiston, FL 33440

41 TITLE V ☐ Change ☒ Addition  
42 NAME Frederick W. Gesell  
43 STREET ADDRESS 1550 Tropical MH Park Old US 27 Lot#57  
44 CITY-ST-ZIP Clewiston, FL 33440

51 TITLE ☐ Change ☐ Addition  
52 NAME ~~360002101953~~  
53 STREET ADDRESS ~~-03/03/97--01026--005~~  
54 CITY-ST-ZIP ~~\*\*\*165.00~~

61 TITLE ☐ Change ☐ Addition  
62 NAME ~~3.3.97~~  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do 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:

Frederick W. Gesell  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frederick Gesell, V.P.

02/12/97

941-983-9113

Date

Daytime Phone #

CR2E034 (9/96)