

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 # **L91008** (7)

1. Corporation Name

SEMINOLE BANK



Principal Place of Business

**10899 PARK BOULEVARD
SEMINOLE FL 34642-5422**

Mailing Address

**10899 PARK BOULEVARD
SEMINOLE FL 34642-5422**

3. Date Incorporated or Qualified
04/01/1991

3a. Date of Last Report
03/23/1995

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

25

29

30

4. FEI Number

59-2365470

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number Not Applicable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 **Dennis R. DeLoach, Jr.**

Signature, typed or printed name of registered agent, and date, if applicable

DATE:

12. OFFICERS AND DIRECTORS

TITLE **CD** ☐ DELETE
NAME **CASTLES, ROBERT G.**
STREET ADDRESS **13861 87TH AVE. NO.**
CITY-STATE-ZIP **SEMINOLE FL**

TITLE **D** ☐ DELETE
NAME **DELOACH, DENNIS R., JR.**
STREET ADDRESS **13575 OAKHURST RD.**
CITY-STATE-ZIP **SEMINOLE FL**

TITLE **D** ☐ DELETE
NAME **FORDHAM, GEORGE E.**
STREET ADDRESS **7175 - 119TH ST. NO.**
CITY-STATE-ZIP **SEMINOLE FL**

TITLE **D** ☐ DELETE
NAME **FRASER, LEWIS L.**
STREET ADDRESS **6300 - 26TH AVE. NO.**
CITY-STATE-ZIP **ST. PETERSBURG FL**

TITLE **D** ☐ DELETE
NAME **HURD, ROBERT L.**
STREET ADDRESS **14583 - 102ND AVE. NO.**
CITY-STATE-ZIP **LARGO FL**

TITLE **D** ☐ DELETE
NAME **LURIE, EDWARD J.**
STREET ADDRESS **12600 - 88TH AVE. NO.**
CITY-STATE-ZIP **SEMINOLE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☐ Change ☒ Addition
NAME **Bruce H. McDowell**
1.2 NAME **1450 Sever: Wood Ct.**
1.3 STREET ADDRESS **Lawrenceville, Ga. 30423**
1.4 CITY-STATE-ZIP

2.1 TITLE **D** ☐ Change ☒ Addition
2.2 NAME **Claude D. McMullen**
2.3 STREET ADDRESS **14180 111th Terr. N.**
2.4 CITY-STATE-ZIP **Largo, Fl. 34644**

3.1 TITLE **D** ☐ Change ☒ Addition
3.2 NAME **Wendell E. Taylor**
3.3 STREET ADDRESS **6833 Greenbriar Dr.**
3.4 CITY-STATE-ZIP **Seminole, Fl. 34642**

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **Jeffery H. Forbes**
4.3 STREET ADDRESS **611 66th Avenue N.**
4.4 CITY-STATE-ZIP **St. Petersburg, Fl. 33705**

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME **Sr. Vice President**
5.3 STREET ADDRESS **Larry C. Cunningham**
5.4 CITY-STATE-ZIP **5630 Denver St. N.E.**
St. Petersburg, Fl. 33703

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME **Sr. Vice President**
6.3 STREET ADDRESS **William R. Young**
6.4 CITY-STATE-ZIP **10500 Village Dr. #E204**
Seminole, Fl. 34642

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:

William R. Young
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
William R. Young Sr. Vice President

11/23/96
Date

(813) 398-5511
Daytime Phone #

CR2E034 (12/95)