

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 22 AM 11:01

DOCUMENT # **M79573** (5)
1. Corporation Name
COMSOUTH FINANCIAL CORP.

Principal Place of Business	Mailing Address
696 1ST AVE. N. STE. #201 ST. PETERSBURG FL 33701 US	696 1ST AVE. N. STE. #201 ST. PETERSBURG FL 33701 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/05/1988	3a. Date of Last Report 04/27/1994
4. FEI Number 59-2872679	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 State, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

LESTER, CUSHMAN & WILKINSON, P.A.
696 FIRST AVE. NORTH
SUITE 201
ST. PETERSBURG FL 33701

10. Name and Address of Now Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	
85 Zip Code	FL

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 this 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: _____ (Print or type name of registered agent and the date filed in) _____ (Print Registered Agent signature here when applicable) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DPGT
NAME	WYSOCKI, OLEANE
CORP ADDRESS	P.O. BOX 544 N/A
CITY, ST, ZIP	NEW PORT RICHER FL 34654
TITLE	
NAME	
CORP ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
CORP ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
CORP ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P/S/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Thomas R. Cushman	
1.3 STREET ADDRESS	696 1st Avenue N., #201	
1.4 CITY-ST-ZIP	St. Petersburg, FL 33701	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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 my name appears on Block 12 or Block 13 of this report, or on an attachment with this filing.

SIGNATURE: *Thomas R. Cushman* Thomas R. Cushman 1/18/95 813-823-1514
(Print or type name of individual officer or director) (Date) (Official Phone #)

LEFTER, CUSHMAN & WILKINSON, P.A.

ATTORNEYS AND COUNSELORS AT LAW

J. BAIRD LEFTER
THOMAS R. CUSHMAN
G. BARRY WILKINSON

696 FIRST AVENUE NORTH, SUITE 201
ST. PETERSBURG, FL 33701-3648
TELEPHONE (813) 823-1514
FAX (813) 823-0328

February 14, 1995

Division of Corporations
Annual Reports
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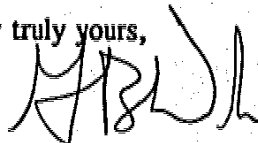
Re: Comsouth Financial Corporation

Dear Sir or Madam:

Please file the enclosed 1995 Annual Report for the above corporation. Enclosed is our check for \$208.75 to cover the filing fee and a Certificate of Status.

If you have any questions or if there is a problem with the filing, please telephone this office before returning the documents. Your prompt attention to this matter is appreciated.

Very truly yours,



G. Barry Wilkinson

GBW:dt

Enclosures