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SECRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: TR	I – COUNTY BANK (Name of corporation)
DOCUMENT NUMBER: POOC	000099930
The enclosed Statement of Change of R	egistered Office/Agent and fee are submitted for filing.
Please return all correspondence concert	ning this matter to the following:
GREGORY	Y V. BEAUCHAMP
	(Name of contact person)
GREGORY	Y V. BEAUCHAMP, P.A. (Firm/Company)
P.	0.Box 1129 (Address)
Chie	Fland, FL 32644
For further information concerning this	(City/state and zip code) matter, please call:
Gregory V. Beauchamp (Name of contact person	at (352) 493-1458 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payab	
Mailing Address Amendment Second P.O. Box 6327 Tallahassee, FL	porations Division of Corporations 409 E. Gaines Street

CR2E045(6/04)

FILED

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

-	*	07.0502, 617.0502, 607.1508, or 617.1508, Florida State	
•	•	orporation organized under the laws of the State of <u>F</u> d office or registered agent, or both, in the State of Flori	
in oraei	r to change its registered	a office or registerea agent, or both, in the state of Fiori	IGG.
1. The name of t	he corporation: TR	I-COUNTY BANK	·
2. The principal	office address:30	2 North Main Street	
3. The mailing a	ddress (if different):	P. O. Box 797, Trenton, FL 326	593
4. Date of incorp	ooration/qualification:	10/24/2000 Document number: P000000	99930
	street address of the cu	rrent registered agent and registered office on file with the	he
	CT CORP	ORATION SYSTEM	
•	1200 S.	Pine Island Road	
	Plantat	ion, FL 33324	38 38 70
6. The name and (if changed):	street address of the ne	w registered agent (if changed) and /or registered office	04 OCT 12 SECRETARY VLLAHASSE
	Gregor	y V. Beauchamp, P.A.	F. P.
	107 Éa	st Park Avenue	07. 7.5 7.5
	(P.O	Box NOT acceptable)	29 RID
,	Chiefl	and, FT. 32626	
The street addre as changed will	ess of its registered office be identical.	ce and the street address of the business office of its re	egistered agent,
Such change wa authorized by th	s authorized by resolut se board, or the corpora	ion duly adopted by its board of directors or by an off ition has been notified in writing of the change.	ficer so
July	utul	Jon Edwards (Printed or typed name and title)	EVP
I hereby accept I further agree to of my duties, an document is bein corporation has	the appointment as reg to comply with the prov d I am familiar with an ng filed merely to refle been notified in writin	listered agent and agree to act in this capacity. Pisions of all statutes relative to the proper and comploid accept the obligation of my position as registered a ct a change in the registered office address, I hereby of g of this change.	ete performance gent. Or, if this confirm that the
Tugony.	J. Beauchar gnature of Registered Agent)	OCTOBER 8, 2004	
	mature of Registered Agent) half of an entity:	y (Date)	
(1	V. DEAUCHAMI (yped or Printed Name)	<u>, </u>	

* * * FILING FEE: \$35.00 * * *