2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2005
Secretary of State

DOCUMENT# P04000035681

Entity Name: SYNOVUS BANK OF JACKSONVILLE

Current Principal Place of Business:

10407 CENTURION PKWY N
JACKSONVILLE, FL

New Principal Place of Business:

10407 CENTURION PKWY N
SUITE 200
JACKSONVILLE, FL 32256 US

Current Mailing Address:

10407 CENTURION PKWY N
JACKSONVILLE, FL

New Mailing Address:

10407 CENTURION PKWY N
SUITE 200
JACKSONVILLE, FL 32256 US

FEI Number: 20-0809944 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DEAN, JERRY L CFO
10407 CENTURION PKWY N
SUITE 200
JACKSONVILLE, FL 32256 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JERRY L. DEAN 07/14/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GLOCK, RICHARD D
Address: 8068 SHADY GROVE RD
City-St-Zip: JACKSONVILLE, FL 32256

Title: D ( ) Delete
Name: GREEN, FRED L III
Address: 1241 MAIN ST
City-St-Zip: COLUMBIA, SC 29201

Title: D ( ) Delete
Name: HARRELL, WILLIAM H
Address: 3964 ALHAMBRA DR W
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete
Name: HAMMEL, WILLIAM J
Address: 4528 KUHN RD
City-St-Zip: JACKSONVILLE, FL 32257

Title: D ( ) Delete
Name: JEFFERSON, FRED
Address: 101 S CRAWFORD ST
City-St-Zip: THOMASVILLE, GA 31792

Title: D ( ) Delete
Name: KUESTER, KENNETH P
Address: 13924 MANDARIN OAKS LANE
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: OLINTO, DAMON B
Address: 9118 BARNSTAPLE LANE
City-St-Zip: JACKSONVILLE, FL 32257

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM J. HAMMEL CEO 07/14/2005
Electronic Signature of Signing Officer or Director Date