

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 04, 2008 8:00 am
Secretary of State

06-04-2008 90009 042 ***550.00

DOCUMENT # P04000035681

1. Entity Name
SYNOVUS BANK OF JACKSONVILLE



Principal Place of Business
**10407 CENTURION PKWY N
SUITE 200
JACKSONVILLE, FL 32256 US**

Mailing Address
**10407 CENTURION PKWY N
SUITE 200
JACKSONVILLE, FL 32256 US**

40107011



05192008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0809944

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLOCK, RICHARD D 8068 SHADY GROVE RD JACKSONVILLE, FL 32256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP OLINTO, DAMON B 9118 BARNSTAPLE LANE JACKSONVILLE, FL 32257
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRELL, WILLIAM H 3964 ALHAMBRA DR W JACKSONVILLE, FL 32207
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC HAMMEL, WILLIAM J 4528 KUHN RD JACKSONVILLE, FL 32257
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JEFFERSON, FRED 101 S CRAWFORD ST THOMASVILLE, GA 31792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUESTER, KENNETH P 295 MARSH LAKES DRIVE FERNANDINA BEACH, FL 32034

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT

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Attachment to: ~~2007 For Profit Corporation Annual Report~~
Document P04000035681
Synovus Bank of Jacksonville

Section 11: Additions to Officers and Directors

Title Name Street Address City-ST-Zip	D Chepenik, Lois H. 2647 Forest Point Court Jacksonville, FL 32257
Title Name Street Address City-ST-Zip	D Dean, Jerry L. 2406 Via Del Rey Fernandina Beach, FL 32034
Title Name Street Address City-ST-Zip	D Ferguson, Ronnie A. 3713 Jacob Cove Way Jacksonville, FL 32218
Title Name Street Address City-ST-Zip	D Hanson, Karl B., Jr. 3823 Painted Bunting Way Jacksonville, FL 32224
Title Name Street Address City-ST-Zip	D Schneider, Michael N. 11563 Hidden Harbor Way Jacksonville, FL 32223
Title Name Street Address City-ST-Zip	D Sheffield, J. Howard 10147 Bishop Lake Road, W Jacksonville, FL 32256

4/27/2007