

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Apr 23 1996 8:00 am
Secretary of State

DOCUMENT #

1. Corporation Name

Compass Bank

P94 0000 94203

Principal Place of Business

Mailing Address

76 South Laura Street
Jacksonville, FL 32202

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Jacksonville, FL 32202

3. Date Incorporated or Qualified 12/31/94	3a. Date of Last Report 5/1/95
4. FEI Number 63-0593897	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. 199.03? Florida Statutes ☐ Yes ☒ No	

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Registered Agent Not Required
Pursuant to F.S. 607.0501
Capitol, FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 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

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

(Initials) Registered Agent Signature required when re-registering

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	☐ DELETE
NAME	Williams, Byrd	
STREET ADDRESS	3368 S. Cove Trace	
CITY-ST-ZIP	Birmingham, al 35216	
TITLE	D	☐ DELETE
NAME	Wright, David N.	
STREET ADDRESS	3671 Higgins Rd.	
CITY-ST-ZIP	Mobile, AL 36619	
TITLE	D	☐ DELETE
NAME	Tinsley, William H.	
STREET ADDRESS	215 Natures Trail Ct.	
CITY-ST-ZIP	Ft. Walton Beach, FL 32548	
TITLE	D	☐ DELETE
NAME	Allcott, Charles III	
STREET ADDRESS	3309 Whiteleaf Circle	
CITY-ST-ZIP	Pensacola, FL 32504	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1. TITLE		☐ Change ☐ Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-ST-ZIP		☐ Change ☐ Addition
5. TITLE		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-ST-ZIP		☐ Change ☐ Addition
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-ST-ZIP		☐ Change ☐ Addition
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-ST-ZIP		☐ Change ☐ Addition

000001791300
04/23/96-01145-027
***200.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Byrd Williams Executive Vice President

4/10/96 205-558-6000
SC-4-23-96

CR2E034 (12/95)