## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P95000007513**1. Corporation Name

VALRICO BANCORP. INC.

Principal Place of Business Mailing Address				
1815 E. STATE ROAD 60 1815 E. STATE ROAD 60				
VALRICO FL 33594 VALRICO FL 33594				DO NOT WRITE IN THIS SPACE
				3. Date incorporated or Qualifed
				01/25/1995
2. Principal Pi	ace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26	_	65-0553757 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
27		<del></del>		Fee Required
City &: State	8	City & State		-6=Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	<b>├</b> ─	Country	B. This corporation owes the current year Intangible     Personal Property Tax.
24	9. Name and Address of Current	29 30		10. Name and Address of New Registered Agent
	9. Name and Address of Current	Treglatorou rigant	81 Name	
			JERRY L. BALL	
1815 E. STATE ROAD 60			82 Street	et Address (P.O. Box Number is Not Acceptable)  815 STATE LOAD 60 6A5T
VALRICO FL 33594			83	013 21410 2 10
	Street Control			85 Zip Code ,
			84 City	VALRICO <b>FL</b> 33594
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. Statutes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the appointment of the purpose of changing its registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am famili				
SIGNATURE LEGISLATURE LEGISLATURE 1/13/17				
				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP OPPICE AIVI		1 TITLE	the contract of the contract o
NAME	TRACY, LARRY R.	,,,	2 NAME	D, P MCLEAN, JOHN E.
STREET ADDRESS	712 SAILFISH DR.		3 STREET ADDRESS	S 717 N VALLICO RD
CITY-ST-ZIP	BRANDON FL		4 CITY-ST-ZIP	VALRICO FL 33594
TITLE	V		1 TITLE	V.D Change Addition
NAME .	BALL, JERRY L.	2.	2 NAME	DOW JERRY L
STREET ADDRESS	1803 DANA COURT	2.	3 STREET ADORESS	
CITY-ST-ZIP	BRANDON FL	. 2.	4 CITY-ST-ZIP	1 20 ANDON EL 335/0
TITLE:	D	- DELETE 3.	1.TITLE	Change XAddition
NAME	MCLEAN, JOHN E.	3.	2 NAME	AMERSON, LEVAUCHTN  AMERSON, LEVAUCHTN  AMERSON, LEVAUCHTN  AND ALL VAULG ROAD
STREET ADDRESS	717 N. VALRICO RD.	. 3.	3 STREET ADDRESS	12512 10 1000-1
CITY-ST-ZIP	VALRICO FL	3.	4. CITY-ST-ZIP	PLANT CITY FL 335UL Change Addition
TITLE	D	☐ DELETE 4.	1 TITLE	ENGLISH. H. LERDY Change Addition
NAME	JENNINGS, CHARLES E.	4.	2 NAME	3120 N. DOVER ROAD
STREET ADDRESS	US HIGHWAY 92	4.	3 STREET ADDRESS	
CITY-ST-ZIP	DOVER FL		4 CITY-ST-ZIP	DOVER FL 33527
TITLE	D	<del>-</del>	1 TITLE	Change Addition
NAME	NOREIGA, JUSTO	3 ·	2 NAME	HolmBERG, DOUGLAS A.
STREET ADDRESS	EAST STATE ROAD 60		3 STREET ADDRESS	
CITY-ST-ZIP	VALRICO FL		4 CITY-ST-ZIP	VALRICO FL 33594
TITLE	חו	☐ DELETE 6.	1 TITLE	Change 🗖 Addition

VALRILO FL RIVERVIEW FL CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 made under oath; that I am an officer or director of the corporation or the receiver or trustee of provided to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that I am an officer or director in Section 119.07(3)(ii), Florida Statutes. I further certify that I am an officer or director in Section 119.07(3)(ii), Florida Statutes. I further certify that I am an officer or director in Section 119.07(3)(ii), Florida Statutes. I further certificate in Section 119.07(3)(ii), Florida Statutes. I further certify that I am an officer in Section 119.07(3)(ii), Florida Statutes. I further certi

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY+ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

D

CARLTON, C. DENNIS

7414 COMMERCE ST.

HENDERSON, GREGORY L., M.D.

33594

2901 BRUCKEN ROAD

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90111 049 \*\*\*150.00