2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000023436

Entity Name: PILOT BANCSHARES, INC.

FILED May 31, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5140 E. FOWLER AVE. TAMPA, FL 33617 **Current Mailing Address: New Mailing Address:** 5140 E. FOWLER AVE. TAMPA, FL 33617 FEI Number: 59-3304822 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: PUFFER, JOHN W III 5140 E. FOWLER AVENUE TAMPA, FL 33617 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition DEWEESE, WILLIAM O Name: Name: 5140 E. FOWLER AVE. Address: Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: Title: () Delete () Change () Addition Name: MILLS, BRETT Name: 5140 E FOWLER AVE Address: Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: Title: () Delete () Change () Addition PORTER, CHARLES G Name: Name: 5140 E. FOWLER AVE. Address: Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: () Delete Title: () Change () Addition PUFFER, JOHN W III Name: Name: Address: 5140 E. FOWLER AVE. Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: Title: () Delete () Change () Addition ROSS, ANN M Name: Name: 5140 E. FOWLER AVE. Address: Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: () Delete Title: Title: () Change () Addition GOEHRING, ROLAND A Name: Name: 5140 E FOWLER AVE Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL

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: BRETT MILLS T 05/31/2002

SMITH, DAVID 5140 E. FOWLER AVE. TAMPA, FL 33617

HARVILL, ALAN D. 5140 E. FOWLER AVE. TAMPA, FL 33617

TOMASINO, PAUL 5140 E. FOWLER AVE. TAMPA, FL 33617

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