

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000011239

Entity Name: CITIZENS BANCSHARES, INC.

FILED
Feb 13, 2006
Secretary of State

Current Principal Place of Business:

2628 CRAWFORDVILLE HWY
CRAWFORDVILLE, FL 323271240

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1240
CRAWFORDVILLE, FL 323261240

New Mailing Address:

FEI Number: 59-3504353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IGLER & DOUGHERTY, P.A.
1501 PARK AVENUE EAST
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

DAVE BUCKRIDGE
2628 CRAWFORDVILLE HWY
CRAWFORDVILLE, FL 32327 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: CINDI LEWIS

02/13/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: PAYNE, MARK W
Address: 38 HIGHLAND ST.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D () Delete
Name: MILLS, WILLIAM E
Address: 4202 COASTAL HIGHWAY
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: PD (X) Delete
Name: YOUNG, L.F. JR.
Address: PO BOX 816
City-St-Zip: CRAWFORDVILLE, FL 32326

Title: CD (X) Delete
Name: BROWN, EDWIN G
Address: P.O. BOX 625 N/A
City-St-Zip: CRAWFORDVILLE, FL 32326

Title: EVPD (X) Delete
Name: DAVIS, JACK D JR
Address: PO BOX 514
City-St-Zip: SOPCHOPPY, FL 32358

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: LEWIS, CINDI H
Address: 24 SECOND AVE SE
City-St-Zip: MOULTRIE, GA 31768

Title: P (X) Change () Addition
Name: HORTMAN, EDWIN W JR
Address: 24 SECOND AVE SE
City-St-Zip: MOULTRIE, GA 31768

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 Chapter 119, 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: CINDI LEWIS

S

02/13/2006

Electronic Signature of Signing Officer or Director

Date