

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P98000014879**

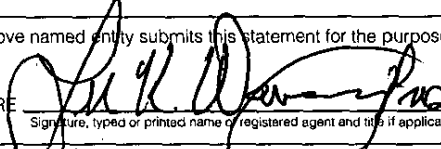
1. Entity Name

LANDMARK FINANCIAL HOLDING COMPANY**FILED**
May 01, 2001 8:00 am
Secretary of State

05-01-2001 90022 044 ***150.00

963857

DO NOT WRITE IN THIS SPACE

Principal Place of Business 3939 MCINTOSH RD SARASOTA FL 34209		Mailing Address 3939 MCINTOSH RD SARASOTA FL 34209	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 58-2384540		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent WARING, LEE K 3939 MCINTOSH ROAD SARASOTA FL 34236		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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. SIGNATURE  Lee K. Waring, President & CEO April 25, 2001 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PENNINGTON, GERALD L 285 SUGAR MILL DRIVE OSPREY FL 34229 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ayres, Annette 540 Casey Key Road Osprey, FL 34229 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEIFER, CHRIS A 16308 VILLARREAL TAMPA FL 33613 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D John B. Harshman 1575 Main Street Sarasota, FL 34236 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIS, ISSAC H M.D. 3280 HOWELL MILL RD, STE 342 ATLANTA GA 30327 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D John M. Steele, M.D. 1828 Roland Street Sarasota, FL 34231 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARING, LEE K 3939 MCINTOSH ROAD SARASOTA FL 34233 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kathleen Toale 2918 Avenue East Holmes Beach, FL 34217 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAYMOND, SUPLEE T 1742 SEMINOLE DRIVE SARASOTA FL 34236 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DABNEY, THOMAS G 4600 CAMINO REAL SARASOTA FL 34231 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  Lee K. Waring		April 25, 2001 941-954-5100 Date Daytime Phone #	

CR2E034 (10/00)