

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 07, 2003 8:00 am
Secretary of State

03-07-2003 90360 001 ***300.00

DOCUMENT # P98000016201

1. Entity Name
COMMUNITY BANK OF MARION COUNTY



Principal Place of Business
**1603 SW 19 AVENUE
OCALA FL 34474**

Mailing Address
**P.O. BOX 1570
OCALA FL 34478-1570**

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 **59-3472696**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
|-------|----------|------------------------------|---|-------|------|----------------|-------------|
| | D | ANDERSON, C. NEAL | 10626 SW 41 PLACE GAINESVILLE FL 32608 | | | | |
| | | | | | | | |
| | D | BAILEY, C. WINSTON | 4905 E. COUNTY ROAD 466 OXFORD FL 34484 | | | | |
| | | | | | | | |
| | D | DAILEY, HUGH F | 12454 NE 14TH AVENUE ANTHONY FL 32617-2621 | | | | |
| | | | | | | | |
| | D | DENYER, DAVID R | 3530 SE 18TH AVENUE OCALA FL 34471 | | | | |
| | | | | | | | |
| | D | ELLENBERG, KENNETH E | 1238 ISABEL DRIVE SANIBEL FL 33957 | | | | |
| | | | | | | | |
| | D | GLADWELL, JIMMY L III | 12551 N.W. HIGHWAY 318 WILLISTON FL 32696 | | | | |
| | | | | | | | |

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/05/03

(352) 369-1000

Date

Daytime Phone #

CR2E034 (10/02)