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Apr 23 1999 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000053895

1. Corporation Name

INDEPENDENT COMMUNITY BANK

Principal Place of Business

307 TEQUESTA DRIVE
TEQUESTA FL

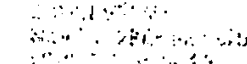
Mailing Address

307 TEQUESTA DRIVE
TEQUESTA FL



04/23/99 90849 023 158.75

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/17/1998	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0771814	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☒ XX	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	Country	29	Country	7. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
 Frederick E. Martin, President				81 Name	Frederick E. Martin
				82 Street Address (P.O. Box Number is Not Acceptable)	307 Tequesta Drive
				83	
				84 City	Tequesta FL
				85 Zip Code	33469

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

Frederick E. Martin, President 4/19/99

DATE

(NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	BOYKIN, LYKES M	1.2 NAME	Bols, Werner
STREET ADDRESS	19889A BEACH ROAD	1.3 STREET ADDRESS	P.O. Box 194
CITY-ST-ZIP	JUPITER ISLAND FL	1.4 CITY-ST-ZIP	Palm City, FL 34990
TITLE	D	2.1 TITLE	D/P/C
NAME	BRICE, HERMAN W SR	2.2 NAME	Martin, Frederick E.
STREET ADDRESS	50 S MILITARY TRAIL	2.3 STREET ADDRESS	7375 Thunder Road
CITY-ST-ZIP	WEST PALM BEACH FL	2.4 CITY-ST-ZIP	Jupiter, FL 33478
TITLE	D	3.1 TITLE	D
NAME	CLARKE, JOHN H	3.2 NAME	Lipin, Dr. Thomas
STREET ADDRESS	19950 BEACH ROAD, 4-N	3.3 STREET ADDRESS	18169 SE Ridgeview Drive
CITY-ST-ZIP	TEQUESTA FL 33469	3.4 CITY-ST-ZIP	Tequesta, FL 33469
TITLE	D	4.1 TITLE	D
NAME	HENDERSON, D. RAY	4.2 NAME	Schnell, Dr. Steven
STREET ADDRESS	17885 SE FEDERAL HIGHWAY	4.3 STREET ADDRESS	Bldg. 3000, Suite 104
CITY-ST-ZIP	JUPITER FL	4.4 CITY-ST-ZIP	210 Jupiter Lakes Blvd.
TITLE	D	5.1 TITLE	D
NAME	JOHNSON, MICHAEL N	5.2 NAME	Kaufman, Charles
STREET ADDRESS	200 CENTRAL BLVD.	5.3 STREET ADDRESS	145 Echo Drive
CITY-ST-ZIP	PALM BEACH GARDENS FL	5.4 CITY-ST-ZIP	Jupiter, FL 33458
TITLE	D	6.1 TITLE	D
NAME	KESSEL, CHRISTIAN F	6.2 NAME	Zuccarelli, John M. III
STREET ADDRESS	2600 S KANNER HWY BLDG V-5	6.3 STREET ADDRESS	104 Lighthouse Drive
CITY-ST-ZIP	STUART FL 34994	6.4 CITY-ST-ZIP	Jupiter Inlet Colony, FL 33469

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 empowered 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 with an address, with all other like empowered.

SIGNATURE:


Frederick E. Martin, President

4/19/99 746-1190

(561)

CR2004 (11/98)

4/27