

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000053895

1. Entity Name

INDEPENDENT COMMUNITY BANK



Principal Place of Business

**250 TEQUESTA DR.
STE 101
TEQUESTA FL 33469**

Mailing Address

**250 TEQUESTA DR.
STE 101
TEQUESTA FL 33469**

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

65-0771814

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, 2004 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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **BOYKIN, LYKES M**
CITY- ST- ZIP **212 CORAL CAY TERR.
PALM BEACH GARDENS FL 33418**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **BRICE, HERMAN W SR**
CITY- ST- ZIP **138 OLYMPUS WAY
JUPITER FL 33427**

TITLE ☐ Delete
NAME **D/P**
STREET ADDRESS **LEATHERS, TIMOTHY L**
CITY- ST- ZIP **7654 SE MUIR WOODS LANE
HOBE SOUND FL 33455**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **HENDERSON, D. RAY**
CITY- ST- ZIP **17885 SE FEDERAL HIGHWAY
JUPITER FL**

TITLE ☐ Delete
NAME **D/C**
STREET ADDRESS **LIPIN, THOMAS**
CITY- ST- ZIP **18169 SE RIDGEVIEW DR.
TEQUESTA FL 33469**

TITLE ☐ Delete
NAME **D/VC**
STREET ADDRESS **ZUCCARELLI, JOHN**
CITY- ST- ZIP **104 LIGHTHOUSE DRIVE
JUPITER INLET COLONY FL 33469**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME **U000000032689**
STREET ADDRESS **02/05/04-80013-016 150.00**
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/04

561-746-1190