2001 UNIFORM BUSINESS REPORT (UBR)

Paid

DOCUMENT # P98000104736

1. Entity Name

PBC FINANCIAL SERVICES, INC.

FILED

01 SEP 28 PM 2:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
00 N. ORANGE STREET ERRY FL 32347 S	P.O. BOX 1247 PERRY FL 32348 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
000 S. Byron Butler Pkwy	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: erry, FL	City & State
Zip: 2348 Country: US	Zip Country

4. FEI Number 59-3412430 ☐ 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
BROOKS, ROGER 100 N. ORANGE STREET PERRY FL 32347	Name: Brooks, R. Roger Street Address (P.O. Box Number is Not Acceptable): 2000 S. Byron Butler Pkwy City: Perry FL 32348

400004618534--0
-10/01/01--01077--015
****150.00 ****50.00

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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		
TLE / AME / REET ADDRESS / TY-ST-ZIP	D DICKERT, JERRY D 100 N. ORANGE STREET PERRY FL 32347	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Dickert, Jerry D. 2000 S. Byron Butler Pkwy Perry, FL 32348	☒ Change ☐ Addition
TLE / AME / REET ADDRESS / TY-ST-ZIP	D HICKS, A. MARSHALL 100 N. ORANGE STREET PERRY FL 32347	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Hicks, A. Marshall 2000 S. Byron Butler Pkwy Perry, FL 32348	☒ Change ☐ Addition
TLE / AME / REET ADDRESS / TY-ST-ZIP	D DICKERT, MARK 100 N. ORANGE STREET PERRY FL 32347	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Dickert, Mark 2000 S. Byron Butler Pkwy Perry, FL 32348	☒ Change ☐ Addition
TLE / AME / REET ADDRESS / TY-ST-ZIP	D DICKERT, PAUL 100 N. ORANGE STREET PERRY FL 32347	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Dickert, Paul 2000 S. Byron Butler Pkwy Perry, FL 32348	☒ Change ☐ Addition
TLE / AME / REET ADDRESS / TY-ST-ZIP	D MITCHELL, FRED SR. 100 N. ORANGE STREET PERRY FL 32347	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Mitchell, Fred Sr. 2000 S. Byron Butler Pkwy Perry, FL 32348	☒ Change ☐ Addition
TLE / AME / REET ADDRESS / TY-ST-ZIP	D BROOKS, ROGER 100 N. ORANGE STREET PERRY FL 32347	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Brooks, R. Roger 2000 S. Byron Butler Pkwy Perry, FL 32348	☒ Change ☐ Addition SP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

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The Citizens Bank
O·F P·E·R·R·Y

(850) 584-4411
FAX (850) 584-8259
P.O. BOX 1247
PERRY, FLORIDA 32348-1247

THOMAS WAKEFIELD WILDE
VICE PRESIDENT/CFO

September 27, 2001
09/27/01

Ms. Stacy Prather
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1150

Dear Ms. Prather:

As per our conversation, I have enclosed copies of all documents originally forwarded on September 10, 2001. We have also enclosed check number 0598 in the amount of $150.00 as replacement of check number 0486 issued March 23, 2001 also in the amount of $150.00.

Please contact me should further action be required to resolve this situation. Thank you for your assistance.

Sincerely,

Thomas Wakefield Wilde
Vice President/CFO

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The Citizens Bank
O·F P·E·R·R·Y

(850) 584-4411
FAX (850) 584-8259
P.O. BOX 1247
PERRY, FLORIDA 32348-1247

September 10, 2001

March 23, 2001

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1150

Dear Sir or Madam:

We recently received a request for filing for the 2001 Uniform Business Report with a due date of September 12, 2001 for one of our subsidiary business entities, PBC Financial Services, Inc., document # P98000104736. When I contacted your office I was advised that there was no record of having received the original filing.

We filed Business Reports for the following entities on March 23, 2001:

Perry Banking Company	PBC Financial Services, Inc	Citizens Bank of Perry
P96000094522	P98000104736	209089
Check # 0160	Check # 0486	Check # 012678
$150.00	$150.00	$150.00
Cleared 03/28/01	Not cleared	Cleared 03/28/01

I have enclosed copies of the file copies of all three reports. I have also enclosed copies of the cleared checks and a copy of the file copy of the check that has not cleared. All three reports and checks were forwarded in the same envelope. I have also enclosed a copy of the certified mail receipt from that mailing.

Please advise as to what action may be necessary to resolve this situation. Thank you for your time and effort.

Sincerely,

Thomas Wakefield Wilde
Vice President/CFO

P04045

TWW UBR-2001 NP

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Division of Corporations
Uniform Business Report Filing
PO Box 1500
Tallahassee, FL 32302-1500

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* B. Date of Delivery MAR 2 6 2001

C. Signature Carl Crawford
X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)*
7099 3220 0011 1772 2225

PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Article Sent To:
Division of Corporations

Postage	$ .55
Certified Fee	1.90
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$3.95

Postmark Here

7099 3220 0011 1772 2225

Name (Please Print Clearly) (To be completed by mailer)
Division of Corporations
Street, Apt. No.; or PO Box No.
PO Box 1500
City, State, ZIP+4
Tallahassee, FL 32302-1500

PS Form 3800, July 1999 See Reverse for Instructions

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

The Citizens Bank of Perry
P.O. Box 1247
Perry, FL 32348

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A signature upon delivery
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
- Certified Mail is not available for any class of international mail.
- NO *INSURANCE* COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain Return Receipt *service*, please complete and attach a Return Receipt (PS Form 3811) to the article *and* add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for *postmarking*. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: *Save this receipt and present it when making an inquiry.*

PS Form 3800, July 1999 (Reverse) 102595-99-M-1938