

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Jul 24, 2000 08:00 AM****Secretary of State****DOCUMENT # P99000008347**

1. Entity Name

FIRST COMMERCIAL BANK OF FLORIDA

Principal Place of Business

945 S ORANGE AVENUE

ORLANDO
32806

FL

Mailing Address

945 S ORANGE AVENUE

ORLANDO
32806

FL

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3560241

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

0000

7. Name and Address of New Registered Agent

Name

ROWE MORRIS A

Street Address (P.O. Box Number is Not Acceptable)

3544 COUNTRY LAKES DRIVE

City

ORLANDO

FLZip Code
32812

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 **MORRIS ALAN ROWE**

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

(NOTE: Registered Agent signature required when reinstating)

07/24/2000

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution.**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	D	<input type="checkbox"/> Delete
NAME	HUHN DOUGLAS A	
STREET ADDRESS	1701 ANTIQUA DRIVE	
CITY-ST-ZIP	ORLANDO FL 32806	

TITLE	D	<input type="checkbox"/> Delete
NAME	DOUDNEY DOUGLAS	
STREET ADDRESS	1443 BUCKWOOD CIRCLE	
CITY-ST-ZIP	ORLANDO FL 32806	

TITLE	D	<input type="checkbox"/> Delete
NAME	CAHILL STEPHEN C	
STREET ADDRESS	2667 LAKE SHORE DRIVE	
CITY-ST-ZIP	ORLANDO FL 32803	

TITLE	D	<input type="checkbox"/> Delete
NAME	BOWYER JAMES W	
STREET ADDRESS	900 LIVE OAK STREET	
CITY-ST-ZIP	MAITLAND FL 32751	

TITLE	D	<input type="checkbox"/> Delete
NAME	BAUKNIGHT JAMES H	
STREET ADDRESS	5600 E IRLO BRONSON MEMORIAL HWY.	
CITY-ST-ZIP	ST. CLOUD FL 34771	

TITLE	D	<input type="checkbox"/> Delete
NAME	ASHER DONALD LJR	
STREET ADDRESS	2221 SANTA ANILLES RD	
CITY-ST-ZIP	ORLANDO FL 32801	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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.

SIGNATURE: DONALD L ASHER JR

D

07/24/2000

**JEFFERY B COWHERD, SVP
1070 CAMPBELL STREET**

ORLANDO, FL 32806

**JOHN W MARTIN, SVP/CFO
1233 SHARON PLACE**

WINTER PARK, FL 32789

**THOMAS A TER BEEK, EVP
2221 SPRING LAKE CIRCLE**

ST. CLOUD, FL 34771

**MICHAEL L SPRAGGINS, SR, DIRECTOR
4 E HARVARD STREET**

ORLANDO, FL 32804

**SIDNEY G SPAFFORD
505 CANTERBURY LANE**

KISSIMMEE, FL 34741

**MORRIS ALAN ROWE, DIRECTOR & PRESIDENT
3544 COUNTRY LAKES DRIVE**

ORLANDO, FL 32812

**PHILIP C OWEN, DIRECTOR
1509 SUNSET POINTE**

KISSIMMEE, FL 34744

**PETER J MCDONALD, DIRECTOR
206 TRANQUILITY COVE**

ALTAMONTE SPRINGS, FL 32701