

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000034387

FILED
Apr 23, 2002 8:00 AM
Secretary of State

Entity Name: CYPRESS BANK

Current Principal Place of Business:

21 CYPRESS POINT PARKWAY
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

21 CYPRESS POINT PARKWAY
PALM COAST, FL 32164

New Mailing Address:

FEI Number: 59-3572957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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:

04/23/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BAYLOR, ALBERT W
Address: RT #1 BOX 181-A
City-St-Zip: BUNNELL, FL 32110

Title: D () Delete
Name: CHIUMENTO, MICHAEL D
Address: 4B OLD KINGS RD N
City-St-Zip: PALM COAST, FL 32137

Title: D () Delete
Name: CREWS, C. SCOTT
Address: P.O. BOX 69
City-St-Zip: BUNNELL, FL 32110

Title: D () Delete
Name: GIBBS, THOMAS L
Address: P.O. BOX 2030
City-St-Zip: BUNNELL, FL 32110

Title: D () Delete
Name: KEYES, GERALD P
Address: 1 FLORIDA PARK DR N STE 107
City-St-Zip: PALM COAST, FL 32137

Title: D () Delete
Name: MARTIN, JOHN J
Address: 220 PALM COAST PKWY SW
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MCNAB, JAMES
Address: P. O. BOX 1230
City-St-Zip: FLAGLER BEACH, FL 32136

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS B. HURY

SVP

04/23/2002

Electronic Signature of Signing Officer or Director

Date

JAMES E. WEITE, JR, DIRECTOR & PRESIDENT
ONE CREEK BEND WAY
ORMOND BEACH, FL 32174

EDWIN E. PREVATTE, MD, DIRECTOR
1660 LAMBERT AVE
FLAGLER BEACH, FL 32136

MICHAEL G. MORELLO, JR., DIRECTOR
PO BOX 351458
PALM COAST FL 32137

BURCE E. PAGE, DIRECTOR & CEO
1520 LAMBERT AVE
FLAGLER BEACH, FL 32136