

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000059915

1. Entity Name

FIRST FLORIDA BANK

Principal Place of Business

8850 TAMiami TRAIL N
NAPLES FL

Mailing Address

8850 TAMiami TRAIL N
NAPLES FL

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 62-1786295

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

Robert O. Smedley
First Florida Bank
8850 Tamiami Trail North
Naples, FL 34108

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.

SIGNATURE

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

Robert O. Smedley, President & CEO

1/24/01

(NOTE: Registered Agent signature required when reinstating)

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, 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

TITLE D ☐ Delete
NAME ANDERSON, LOWELL C
STREET ADDRESS 8850 TAMiami TRAIL NORTH
CITY-ST-ZIP NAPLES FL 34108

TITLE PD ☐ Change ☒ Addition
NAME Smedley, Robert O.
STREET ADDRESS 8850 Tamiami Trail North
CITY-ST-ZIP Naples, FL 34108

TITLE D ☐ Delete
NAME BRAUN, CHRISTOPHER A
STREET ADDRESS 197 SILVERADO DR
CITY-ST-ZIP NAPLES FL 34119

TITLE D ☐ Change ☒ Addition
NAME Werner, George
STREET ADDRESS 1919 Trade Center Way, Ste. 2
CITY-ST-ZIP Naples, FL 34109

TITLE D ☐ Delete
NAME CENSITS, RICHARD J
STREET ADDRESS 888 ANNEMORE LANE
CITY-ST-ZIP NAPLES FL 34108

TITLE D ☐ Change ☒ Addition
NAME Kaplan, Samuel L.
STREET ADDRESS 90 S. 7th Street #5500
CITY-ST-ZIP Minneapolis, MN 55402

TITLE D ☐ Delete
NAME FLOOD, WILLIAM J
STREET ADDRESS 9 SENECA TRAIL
CITY-ST-ZIP CONYNGHAM PA 18219

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

TITLE D ☐ Delete
NAME GOODMAN, KENNETH D
STREET ADDRESS 6622 NEWHAVEN CIR
CITY-ST-ZIP NAPLES FL 34109

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

TITLE D ☐ Delete
NAME HOYT, JOHN W
STREET ADDRESS 8850 TAMiami TRAIL NORTH
CITY-ST-ZIP NAPLES FL 34108

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert O. Smedley, President & CEO

Date

941-597-8989

Daytime Phone #

CR2E034 (10/00)

Attachment DH # 0000059915

25914

002293

FIRST
FLORIDA



8850 TAMiami TRAIL
NAPLES, FLORIDA 34108
941-597-8989

REFERENCE: V0000000094

CHECK DATE: 01/26/01

\$*****150.00

ONE HUNDRED FIFTY AND 00/100*****

Dollars

PAY TO THE ORDER OF

EXPENSE CHECK

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILING
PO BOX 1500
TALLAHASSEE FL 32302-1500

AUTHORIZED SIGNATURE

002293 0670147670 0150000032

533

* V E N D O R P A Y M E N T *

002293

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILING
PO BOX 1500
TALLAHASSEE FL 32302-1500

CHECK DATE: 01/26/01
REFERENCE NUMBER: V0000000094

CHECK DISTRIBUTION

INVOICE DATE	INVOICE NUMBER	AMOUNT	MEMO
01/24/01	621786295	150.00	
CHECK AMOUNT:		150.00	

FIRST FLORIDA BANK
8055 TAMiami TRAIL N
NAPLES FL 34108
PHONE: 941-597-8989

The original check was sent in
without the supporting Documents.
Please see this check goes to
this account.