

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S56524 (9)

1. Corporation Name

PRIME BANK OF CENTRAL FLORIDA

Principal Place of Business

**680 COUNTRY CLUB DRIVE
TITUSVILLE FL 32780-4977**

Mailing Address

**680 COUNTRY CLUB DRIVE
TITUSVILLE FL 32780-4977**

**APPROVED
AND
FILED**

95 MAY -1 PH 9:45

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/31/1991

3a. Date of Last Report

07/22/1994

4. FEI Number

59-2720590

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added in Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NOT REQUIRED PURSUANT TO CHAPTER
607.0501(2) OF THE FLORIDA STATUTES
. FL**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

NOTE: Registered Agent signature required when resigning.

DATE

12. OFFICERS AND DIRECTORS

TITLE	C
NAME	MARTO JR., JOSEPH V.
STREET ADDRESS	460 ORIOLE LANE
CITY, ST, ZIP	INDIANLANTIC FL
TITLE	D
NAME	SWANN, JIM
STREET ADDRESS	402 HIGH POINT DRIVE
CITY, ST, ZIP	COCOA FL
TITLE	D
NAME	WHITE, BILLY H.
STREET ADDRESS	3850 DAIRY ROAD
CITY, ST, ZIP	TITUSVILLE FL
TITLE	D
NAME	HERMANSEN, BJORNAR
STREET ADDRESS	205 HACIENDA DRIVE
CITY, ST, ZIP	MERRITT ISLAND FL
TITLE	D
NAME	SPIRA, JACK B.
STREET ADDRESS	5205 BABCOCK STREET, NE
CITY, ST, ZIP	PALM BAY FL
TITLE	D
NAME	WATERS, MARILYN
STREET ADDRESS	840 NEW HAVEN AVENUE
CITY, ST, ZIP	MELBOURNE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Chairman, President & CEO	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY, ST, ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY, ST, ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY, ST, ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY, ST, ZIP		
5.1 TITLE	Resigned	☒ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE	Resigned	☒ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: P. Bryan Fulmer, Jr., CFO 4-27-95 407/268-3800

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

556524

PRIME BANK OF CENTRAL FLORIDA - ADDITIONAL DIRECTORS

Robert A. Baugher
118 Sunset Lane
Cocoa Beach, FL 32931

John Henry Jones
2850 Dairy Road
Titusville, FL 32796

Floyd C. Lemmon
3156 newfound Harbor Drive
Merritt Island, FL 32952

John D. Williams
3948 Rambling Acres Drive
Tituville, FL 32796