

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY 25 PM 12:24

DOCUMENT # V36762

(5)

1. Corporation Name

COMMERCE BANK CORPORATION

DO NOT WRITE IN THIS SPACE.

Principal Place of Business

**141 CENTRAL AVENUE EAST
WINTER HAVEN FL**

Mailing Address

**141 CENTRAL AVENUE EAST
WINTER HAVEN FL**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

3. Date Incorporated or Qualified

05/18/1992

3a. Date of Last Report

04/08/1994

4. FEI Number

59-3186530

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to 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

**IGLER, A GEORGE
315 S CALHOUN ST
SUITE 701
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**P
STEPHENS J E JR
43 LAKE LINK CIR SE
WINTER HAVEN FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**ST
HURLEY, LONA M
3119 DAVILANE ST., NADEL HILLS
HAINES CITY FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
BRANDON, JACK P
1147 N LAKE SHORE BLVD
LAKE WALES FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
INGRAM, DON E
7 HICKORY WAY
WINTER HAVEN FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
KREIGER, ROBERT L
2657 CRYSTAL BEACH RD
WINTER HAVEN FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
MURRELL, WILLIAM H JR
PO BOX 7291/NA
WINTER HAVEN FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J.E. Stephens, Jr.

5/10/95

DATE

(813) 299-6072

TELEPHONE NUMBER

V36762

D	Phillips, Roger M. 3653 Harbor Circle Winter Haven, FL
D/C	Raley, William L. Sr. Post Office Box 1112 Winter Haven, FL
D	Rombola, Robert A. MD 5 Lake Link Dr Winter Haven, FL
D	Simon, Michael J. MD 2669 Crystal Beach Rd Winter Haven, FL
D	Swain, Brian K. 9400 W Lake Ruby Dr Winter Haven, FL
D	Turner, Robert C. 899 W Lake Otis Dr Winter Haven, FL
D	Bentley, Patrick T. 1300 Island Way Winter Haven, FL
Sr VP	Roberts, Cynthia B. 4271 Stafford Dr. SW Winter Haven, FL
Sr VP	Phillips, Robert C. Post Office Box 1562 Winter Haven, FL
VP	Hoosier, Theresa M. 200 Desoto Rd SE Winter Haven, FL
VP	Touchtone, Janice A. 500 Sidney Circle Winter Haven, FL
Asst VP	Taillefer, Helen M. 271 Hernando Rd SE Winter Haven, FL
Asst VP	Linton, Sarah L. 201 Collier Dr. SE Winter Haven, FL
VP	DeHart, Wayne M. 254 Winter Ridge Blvd Winter Haven, FL