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Feb 11 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # V69849

(0)

1. Corporation Name

SUNTRUST BANK, GULF COAST

Principal Place of Business

1777 MAIN STREET
SARASOTA FL 34236
US

Mailing Address

P.O BOX 2138
SARASOTA FL 34230-2138
US



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

3. Date Incorporated or Qualified

01/01/1993

3a. Date of Last Report

02/05/1996

4. FEI Number

59-2565490

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

10. Name and Address of New Registered Agent

Christopher R. Narvaez
SunTrust Bank, Gulf Coast
1777 Main Street
Sarasota, FL 34230

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

Christopher R. Narvaez CEO & EVP

January 24, 1997

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CP	<input checked="" type="checkbox"/> DELETE
NAME	HASHAGAN, JOHN P	
STREET ADDRESS	1777 MAIN STREET	
CITY - ST - ZIP	SARASOTA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BAUMANN, CHARLES R	
STREET ADDRESS	1777 MAIN STREET	
CITY - ST - ZIP	SARASOTA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BLANCHARD, EDWARD E 111	
STREET ADDRESS	1777 MAIN STREET	
CITY - ST - ZIP	SARASOTA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DIBBLE, JOHN R	
STREET ADDRESS	1777 MAIN STREET	
CITY - ST - ZIP	SARASOTA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HUSKEY, MARVIN T	
STREET ADDRESS	1777 MAIN ST	
CITY - ST - ZIP	SARASOTA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ROYAL, RON A	
STREET ADDRESS	1777 MAIN ST	
CITY - ST - ZIP	SARASOTA FL	

1.1 TITLE	C	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	William R. Klich	
1.3 STREET ADDRESS	1777 Main Street	
1.4 CITY - ST - ZIP	Sarasota, FL	
2.1 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Ray L. Sandhagen	
2.3 STREET ADDRESS	1777 Main Street	
2.4 CITY - ST - ZIP	Sarasota, FL	
3.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Christopher R. Narvaez	
3.3 STREET ADDRESS	1777 Main Street	
3.4 CITY - ST - ZIP	Sarasota, FL	
4.1 TITLE	Company #	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	084	
4.3 STREET ADDRESS	Approval	
4.4 CITY - ST - ZIP	Approval	
5.1 TITLE	GI Account	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Center	
5.3 STREET ADDRESS	Amount	
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Christopher R. Narvaez CEO & EVP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/97

(941) 951-3165

Daytime Phone #

0423214

CR2E034 (9/96)