


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2004 8:00 am
Secretary of State

01-26-2004 90064 028 ***150.00

DOCUMENT # F02000003810

1. Entity Name
ICBA FINANCIAL SERVICES CORPORATION



Principal Place of Business
**775 RIDGE LAKE BLVD., SUITE 185
 MEMPHIS, TN 38120**

Mailing Address
**775 RIDGE LAKE BLVD., SUITE 185
 MEMPHIS, TN 38120**

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country



01072004 Chg-P CR2E034 (10/03)

4. FEI Number
41-1755058 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent
 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.	
TITLE P <input type="checkbox"/> Delete	NAME REID, WILLIAM R	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	SEE ATTACHED LIST
STREET ADDRESS 775 RIDGE LAKE BLVD., SUITE 185	CITY-ST-ZIP MEMPHIS, TN 38120	NAME	
TITLE DT <input type="checkbox"/> Delete	NAME DEVRIES, HAROLD L	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 518 LINCOLN RD	CITY-ST-ZIP SAUK CENTRE, MN 56378	NAME	
TITLE S <input type="checkbox"/> Delete	NAME TEAGNO, GARY	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 2107 WILSON BLVD, STE 400	CITY-ST-ZIP ARLINGTON, VA 22201	NAME	
TITLE D <input type="checkbox"/> Delete	NAME GULLEDGE, ROBERT	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS PO BOX 569, HWY 104 & PALMER ST	CITY-ST-ZIP ROBERTSDALE, AL 36567	NAME	
TITLE D <input type="checkbox"/> Delete	NAME ABBATE, ANTHONY	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS PARK 80 W., PLAZA 2	CITY-ST-ZIP SADDLE BROOK, NJ 07663	NAME	
TITLE D <input type="checkbox"/> Delete	NAME GUENTHER, KENNETH	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS ONE THOMAS CIR, STE 400	CITY-ST-ZIP WASHINGTON, DC 20005	NAME	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Harold Devries* **HAROLD DEVRIES** X **320-352-6546**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

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Attachment

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ICBA FINANCIAL SERVICES

DIRECTORS & OFFICERS

NAME	BANK NAME	STREET ADDRESS	ADDRESS	CITY, STATE, ZIP CODE	SS #
ANTHONY ABBATE	Interchange State Bank	Park 80 West/Plaza 2		Saddle Brook, NJ 07663	088-30-6917
DIRECTOR	HOME ADDRESS:	6 Robin Hood Court		Montvale, NJ 07645	
KENNETH GUENTHER	ICBA	One Thomas Circle, NW Ste 400		Washington, DC 20005	084-28--5533
DIRECTOR	HOME ADDRESS:	4513 Dalton Road		Chevy Chase, MD 20815	
ROBERT GULLEDGE	Citizens Bank, Inc.	Hwy 104 & Palmer St	PO Box 569	Robertsdale, AL 36567	423-42-2259
DIRECTOR	HOME ADDRESS:		PO Box 846	Robertsdale, AL 36567	
CLAY HENRY	The Harleysville Bank & Trust Co	483 Main Str		Harleysville, PA 19435-0195	
DIRECTOR	HOME ADDRESS:				
JAMES RIFFE	Highlands Union Bank	340 W Main St	PO Box 1128	Abingdon, VA 24210	233-86-3398
DIRECTOR	HOME ADDRESS:				
DONALD L. KOVACH	Sussex Bank	399 Rte 23	PO Box 353	Franklin, NJ 07416-2125	
DIRECTOR	HOME ADDRESS:				
JEFF A. NUNN	Citizens Bank	211 E Main St	PO Box 1228	Tucumcari, NM 88401-2222	
DIRECTOR	HOME ADDRESS:				
A. PIERCE STONE	Virginia Community Bank	114 Industrial Dr	PO Box 888	Louisa VA 23093-0888	
BOARD CHAIRMAN	HOME ADDRESS:				
HAROLD L. DEVRIES	ICBA	518 Lincoln Road	PO Box 267	Sauk Centre, MN 56378	360-34-0929
TREASURER/CFO	HOME ADDRESS:	625 E. Lake Geneva Rd, NE		Alexandria, MN 56308	
WILLIAM W. REID	ICBA Financial Services Corp	775 Ridge Lake Blvd Ste #185		Memphis, TN 38120	425-98-5877
DIRECTOR/PRES & CEO	HOME ADDRESS:	3440 Alfred Drive		Memphis, TN 38133	
GARY TEAGNO	ICBA Community Banking Network	2107 Wilson Blvd Ste 400	PO Box 9376	Arlington, VA 22201	228-78-2761
SECRETARY	HOME ADDRESS:	307 S Adam St		Arlington, VA 22204	