

CHANGE OF INFORMATION FORM

Please list any changes that have occurred during the last quarter regarding the following executive position of your bank:

CHAIRMAN _____

CHIEF EXECUTIVE OFFICER _____

PRESIDENT _____

VICE PRESIDENT _____

TELEPHONE NUMBER (Bank) _____

MAILING ADDRESS (Bank) _____

Please forward this completed form only in the event changes have occurred to the attention of: Cynthia Nixon, State Bank Department.

Bank Name

City