2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001254

Entity Name: THE BANCORP BANK

FILED Apr 01, 2008 Secretary of State

Date

Current Principal Place of Business: New Principal Place of Business: 405 SILVERSIDE ROAD WILMINGTON, DE 19809 **Current Mailing Address: New Mailing Address:** 3905 EL REY ROAD ORLANDO, FL 32808 FEI Number: 20-2111361 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARTMAN, JAMES C 3905 EL RÉY ROAD ORLANDO, FL 32808 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PCOD () Delete Title: () Change () Addition MASTRANGELO, FRANK Name: Name: 405 SILVERSIDE ROAD Address: Address: City-St-Zip: WILMINGTON, DE 19809 City-St-Zip: Title: VPT Title: () Delete () Change () Addition Name: EGAN, MARTIN F Name: 405 SILVERSIDE ROAD Address: Address: WILMINGTON, DE 19809 City-St-Zip: City-St-Zip: Title: Title: CFO () Delete () Change () Addition COHEN, BETSY Z Name: Name: 405 SILVERSIDE ROAD Address: Address: City-St-Zip: WILMINGTON, DE 19809 City-St-Zip: Title: VC () Delete Title: () Change () Addition COHEN, D. GIDEON Name: Name: Address: 405 SILVERSIDE ROAD Address: City-St-Zip: WILMINGTON, DE 19809 City-St-Zip: Title: EVP Title: () Delete () Change () Addition MEGARGEE, SCOTT R Name: Name: 405 SILVERSIDE ROAD Address: Address: City-St-Zip: WILMINGTON, DE 19809 City-St-Zip: Title: () Delete Title: () Change () Addition HARTMAN, JAMES C Name: Name: 3905 EL REY ROAD Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32808

above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES HARTMAN VP 04/01/2008

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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