# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 30, 2009**
**Secretary of State**

DOCUMENT# P02000033247

**Entity Name:** FCB FLORIDA BANCORPORATION, INC.

**Current Principal Place of Business:**

945 S ORANGE AVE
ORLANDO, FL 32806

**New Principal Place of Business:**

**Current Mailing Address:**

945 S ORANGE AVE
ORLANDO, FL 32806

**New Mailing Address:**

**FEI Number: 52-2366191** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ROWE, M. ALAN
945 S ORANGE AVE
ORLANDO, FL 32806 US

**Name and Address of New Registered Agent:**

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:**

Title: D/C ( ) Delete
Name: ASHER, DONALD L JR
Address: 2221 SANTA ANTILLES RD.
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete
Name: MCDONALD, PETER J
Address: 39144 HARBOR HILLS BLVD
City-St-Zip: LADY LAKE, FL 32159

Title: D ( ) Delete
Name: BOWYER, JAMES W
Address: 900 LIVE OAK STREET
City-St-Zip: MAITLAND, FL 32751

Title: D ( ) Delete
Name: CAHILL, STEPHEN C
Address: 2667 LAKE SHORE DRIVE
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete
Name: DOUDNEY, DOUGLAS
Address: 1443 BUCKWOOD CIRCLE
City-St-Zip: ORLANDO, FL 32806

Title: D ( ) Delete
Name: HUHN, DOUGLAS A
Address: 1610 WATERWITCH DR
City-St-Zip: ORLANDO, FL 32806

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: BAUKNIGHT, JAMES H
Address: 5600 E.IRLO BRONSON MEMORIAL HWY
City-St-Zip: ST. CLOUD, FL 34771

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: JOHN W. MARTIN CFO 04/30/2009

Electronic Signature of Signing Officer or Director — Date