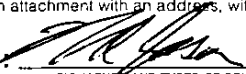


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90187 040 ***150.00

DOCUMENT # P05000144296 1. Entity Name FLAGSHIP COMMUNITY BANK					
Principal Place of Business 4095 TAMPA ROAD OLDSMAR, FL 34677			Mailing Address 4095 TAMPA ROAD OLDSMAR, FL 34677		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		4. FEI Number 202472079 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Chg-P CR2E034 (11/05)	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
Name Street Address (P.O. Box Number is Not Acceptable) City				Name Street Address (P.O. Box Number is Not Acceptable) City	
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, 2006 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 NAME STREET ADDRESS CITY-ST-ZIP	D BARIS, CARRIE BETH 3405 WEST BARCELONA STREET TAMPA, FL 33629	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kimpton, William J. 265 Bayside Dr. Clearwater, FL 33767	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRAUN, DEAN W 5016 WEST SHORE DR NEW PORT RICHEY, FL 34652	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lazar, Jeffrey, M 871 River Rd LaBelle, FL 33935	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURKE, FRANCIS T II 6496 32ND AVENUE N ST PETERSBURG, FL 33710	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lesser, Marsha L. 2434 Kent Pl. Clearwater, FL 33764	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURKE, JOSEPH J 9536 W HIGHWAY 326 OCALA, FL 34482	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Willenbacher, Michael A. 6201 Guilford Dr. New Port Richey, FL 34655	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GEHRING, RICHARD E 217 ABERDEEN STREET DUNEDIN, FL 34698	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S Jason, Robert A. 105 Island Way, Apt. 137 Clearwater, FL 33767	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEMMER, FREDERICK A 11970 7TH STREET EAST TREASURE ISLAND, FL 33706	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Jefferies, Stephen M. 3012 Clubhouse Dr. W. Clearwater, FL 33761	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as it 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: 			Robert A. Jason, SVP/CFO		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #

ATTACHMENT

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

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FLAGSHIP COMMUNITY BANK

40066486
#P05000144296

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE

P/D

X Change

NAME

Burke, Francis T II

STREET ADDRESS

6496 32nd Avenue N

CITY ST ZIP

ST. Petersburg, FL 33710