## F98000003564

(Requestor's Name)				
.4.				
(Address)				
(Address)				
,				
(City/State/Zip/Phone #)				
(,				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entity Name)				
(Document Number)				
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SCORETARY OF STATE
AND AHASSEE FLOODS

of or

## **COVER LETTER**

TO: Amend Divisio	ment Section n of Corporations	•		
•	·			
SURJECT. SU	UPERIOR BANCORP, INC.			
50 B0 E 11	(Name of Corpora	tion)		
DOCUMENT	NUMBER: F98000003564	<u></u>		
The enclosed St	tatement of Change of Registered Office/Ager	at and fee are submitted for filing.		
Please return all	correspondence concerning this matter to the	following:		
ng Mili per upana	David Biliter	e de die e de la company		
	(Name of Contact P	erson)		
Superior Bancorp				
	(Firm/Company	<del>(</del> )		
36301 U.S. Highway 19 North (Address)				
	Palm Harbor, FL 34684 (City/State and Zip	Code)		
For further info	rmation concerning this matter, please call:	,		
David Biliter	(Name of Contact Person) at (	727 772-7100 (Area Code & Daytime Telephone Number)		
Enclosed is a \$3	5.00 check made payable to the Department of	f State.		
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	e provisions of sections 607.0502, 617.050 cange is submitted for a corporation organ			
in ord	ler to change its registered office or registe	ered agent, or both, in the State of Fl	orida.	
1. The name of	the corporation: Superior Bancorp			
2. The principa	l office address: 17 North 20th Street,	Birmingham, AL 35203	<del> </del>	
3. The mailing	address (if different): 17 North 20th St	reet, Birmingham, AL 35203	3 08 J	
4. Date of incom	rporation/qualification: 06/23/1998	Document number: F980000	003564	
	d street address of the current registered a artment of State:	gent and registered office on file with		
	CT Corporation		STATE STATE	
	1200 South Pine Island Rd		RATE 3	
	Plantation, FL 33324			
6. The name an (if changed):	d street address of the new registered ager	at (if changed) and /or registered office	ce	
	Superior Bank Attn: David E	Biliter		
	36301 U.S. Highway 19 Nor			
	(P.O. Box NOT acceptable) Palm Harbor, FL 34684			
The street addr as changed wil	ress of its registered office and the street I be identical.	address of the business office of its	registered agent,	
Such change wauthorized by t	vas authorized by resolution duly adopted the board, of the corporation has been no	by its board of directors or by an extified in writing of the change.	officer so	
K.k. (Signal	D. Hardus ture of an officer or director)	Rick D. Gardner, Chief Ope	<del></del>	
I hereby accept I further agree of my duties, and document is be corporation ha	t the appointment as registered agent an to comply with the provisions of all stat nd I am familiar with and accept the obl ing filed merely to reflect a change in th ss been notified in writing of this change.	d agree to act in this capacity. utes relative to the proper and com igation of my position as registered e registered office address, I hereby	plete performance agent. Or, if this confirm that the	
12	ighature of Registered Agent)	David Biliter, Regional Ex	ecutive	
·	ehalf of an entity:	(Duny)		
Superior Ba	·			
(	Typed or Printed Name)			
* * * FILING FEE: \$35.00 * * *				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)