



2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H63495 1. Entity Name BANK OF ST. PETERSBURG			
Principal Place of Business 777 PASADENA AVENUE SOUTH ST. PETERSBURG, FL 33707-2031		Mailing Address 3065 34TH ST NO SAINT PETERSBURG, FL 33713	

FILED
 04 AUG 30 AM 8:18
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



2. Principal Place of Business One Tampa City Center Suite, Apt. #, etc. Suite 100 City & State Tampa, FL Zip 33602		3. Mailing Address One Tampa City Center Suite, Apt. #, etc. Suite 100 City & State Tampa, FL Zip 33602		4. FEI Number 59-2331908		Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			

6. Name and Address of Current Registered Agent LARMORE, MARY K BANK OF ST. PETERSBURG 777 PASADENA AVE., S. ST. PETERSBURG, FL 33707				7. Name and Address of New Registered Agent Name Ceil Read Street Address (P.O. Box Number is Not Acceptable) Bank of St Petersburg One Tampa City Center, Suite 100 City Tampa FL 33602			
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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 **Ceil Read, Corporate Secretary** **Ceil Read** **08/20/04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees 300041098739 09/15/04--01032--027 **158.75	
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	CD ROTHMAN, ROBERT	100 N. TAMPA STREET, SUITE 3675	TAMPA, FL 33602		VC/D Robert Rothman	100 N. Tampa St, Suite 3675	Tampa, FL 33602
	D CANNOVA, MICHAEL F	929 59TH AVENUE	ST. PETE BEACH, FL 33706		C/D Anthony F. Gonzalez	One Tampa City Ctr, Suite 100	Tampa, FL 33602
	PD LAFALCE, FRANK A	16210 ALEXIS DRIVE	TAMPA, FL 33624		SVAD Frank A. Lafalce	3065 34th Street North	St. Petersburg, FL 33713
	VDS LARMORE, MARY K	5990 61ST AVENUE, SOUTH	ST. PETERSBURG, FL 33715		SVAD Mary K Larmore	777 Pasadena Avenue South	St. Petersburg, FL 33707
	V BONDS, MICHAEL M	7039 123RD STREET, NORTH	SEMINOLE, FL 33772		VC/D Joseph L. Caballero	One Tampa City Center, Suite 100	Tampa, FL 33602
	V HILL, MARY A	12738 GORDA CIR	LARGO, FL 33773		SVP Richard M. Bartholomae	One Tampa City Center, Suite 100	Tampa, FL 33602

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Joseph L. Caballero, President/CEO** **08/20/04** **813-569-7510**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H63495

1. Entity Name
BANK OF ST. PETERSBURG



Principal Place of Business
777 PASADENA AVENUE SOUTH
ST. PETERSBURG, FL 33707-2031

Mailing Address
3065 34TH ST NO
SAINT PETERSBURG, FL 33713

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08132004 Chg-P CR2E034 (10/03)

4. FEI Number
59-2331908

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LARMORE, MARY K
BANK OF ST. PETERSBURG
777 PASADENA AVE., S.
ST. PETERSBURG, FL 33707

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
ROTHMAN, ROBERT
100 N. TAMPA STREET, SUITE 3675
TAMPA, FL 33602 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CANNOVA, MICHAEL F
929 59TH AVENUE
ST. PETE BEACH, FL 33706 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
LAFALCE, FRANK A
15210 ALEXIS DRIVE
TAMPA, FL 33624 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VDS
LARMORE, MARY K
5399 61ST AVENUE, SOUTH
ST. PETERSBURG, FL 33715 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BONDS, MICHAEL M
7039 123RD STREET, NORTH
SEMINOLE, FL 33772 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
HILL, MARY A
12738 GORDA CIR
LARGO, FL 33773 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVA/COO/D
Kathryn B. Pemble
777 Pasadena Avenue South
St. Petersburg, FL 33707 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP/D
Stephen B. Stagg
One Tampa City Center, Suite 100
Tampa, FL 33602 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP/D
Edmund M. O'Carroll
One Tampa City Center, Suite 100
Tampa, FL 33602 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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Joseph C. Caballero, Pres. & CEO
08/20/04 813-569-7518

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #