2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K59519

FILED Apr 28, 2009 Secretary of State

Entity Name: BANKERS' BANCORPORATION OF FLORIDA, INC.

Current Principal Place of Business:			New Princip	New Principal Place of Business:		
615 CRESO SUITE 400	CENT EXECU	TIVE CT				
	Y, FL 32746	US				
Current Mailing Address:			New Mailing	New Mailing Address:		
PO BOX 958423 LAKE MARY, FL 327958423 US			SUITE 400	615 CRESCENT EXECUTIVE CT SUITE 400 LAKE MARY, FL 32746 US		
FEI Number:	59-2927007	FEI Number Applied For()	FEI Number Not Applic	cable () Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and A	Address of New Registered Agent:		
MCKILLOP, JAMES H III 615 CRESCENT EXECUTIVE CT SUITE 400 LAKE MARY, FL 32746 US			615 CRESCI SUITE 400	ALLEN, PAUL S SVP 615 CRESCENT EXECUTIVE CT SUITE 400 LAKE MARY, FL 32746 US		
The above in the State		submits this statement for the po	urpose of changing its	s registered office or registered agent, or both,		
SIGNATUR	RE: PAUL S. /	ALLEN		04/28/2009		
	Electron	ic Signature of Registered Age	nt	Date		
Election Cam	npaign Financing	g Trust Fund Contribution ().				
OFFICERS	AND DIREC	TORS:	ADDITIONS	S/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	TRANTER, JOH	TEREY RD, STE 200	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	MCKILLOP, JAN	FEXECUTIVE CT STE 400	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	BRYANT, GREC	SHORE BLVD., STE 150	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	KEIR, BRUCE	RCE PARKWAY, STE 200	Name: Address:	SVP (X) Change () Addition ALLEN, PAUL S 615 CRESCENT EXECUTIVE COURT, STE 400 LAKE MARY, FL 32746		
Title: Name: Address: City-St-Zip:	FANT, JULIAN E 1234 KING STR		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	CARRAWAY, F	HINGTON STREET	Title: Name: Address: City-St-Zip:	() Change () Addition		

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: PAUL S. ALLEN SVP 04/28/2009