

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000026202

FILED  
Jan 12, 2010  
Secretary of State

**Entity Name:** SUNSHINE STATE COMMUNITY BANK

**Current Principal Place of Business:**

4777 CLYDE MORRIS BLVD  
PORT ORANGE, FL 32129

**New Principal Place of Business:**

**Current Mailing Address:**

4777 CLYDE MORRIS BLVD  
PORT ORANGE, FL 32129

**New Mailing Address:**

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

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

BRINN, DENNIS E CEO  
4777 CLYDE MORRIS BLVD  
PORT ORANGE, FL 32127      US

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

BRINN, DENNIS E CEO  
4777 CLYDE MORRIS BLVD  
PORT ORANGE, FL 32129      US

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

01/12/2010

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: O  
Name: BRINN, DENNIS E  
Address: 3 TOMOKA VIEW DR  
City-St-Zip: ORMOND BEACH, FL 32174

Title: O  
Name: RODDY, EDMUND J  
Address: 3575 MARIBELLA DR  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: C  
Name: GEORGE C SCOTT  
Address: 3018 S. PENINSULA DR  
City-St-Zip: DAYTONA BEACH, FL 32127

Title: D  
Name: ALAN R. CROUCH  
Address: 3792 EMILIA DR  
City-St-Zip: DAYTONA BEACH, FL 32119

Title: D  
Name: ROBERT KIT KOREY  
Address: 2054 JOHN ANDERSON DR  
City-St-Zip: ORMOND BEACH, FL 32176

Title: D  
Name: KENNETH L STAUDT DDS  
Address: 944 BRIDGEWATER DR # 2B  
City-St-Zip: PORT ORANGE, FL 32119

I hereby 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 all other like empowered.

SIGNATURE: EDMUND J. RODDY

CFO

01/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date