2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000074805

Entity Name: THE ROYAL PALM BANK OF FLORIDA

FILED Mar 30, 2007 Secretary of State

Ourself Britainal Black of Business				New Principal Place of Business			
Current Principal Place of Business:				New Principal Place of Business:			
1255 CREE NAPLES, F	KSIDE PARKV L 34108 US						
Current Mailing Address:				New Mailing Address:			
1255 CREE NAPLES, F	KSIDE PARKV L 34108 US						
FEI Number:	59-3746472	FEI Number Applied For ()	FEI Numbe	er Not Applic	able ()	Certificate of Status	Desired ()
Name and Address of Current Registered Agent:			N	Name and Address of New Registered Agent:			
			1:	IAAKE, AR 255 CREEI IAPLES, FL	KSIDE PARKV	_	
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.							
SIGNATUR	E: ARNOLD	J HAAKE				03/30/2007	
	Electronic	Signature of Registered Agent	t			Date	
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () I SMITH, PAUL M 1255 CREEKSID NAPLES, FL 34	E PARKWAY	Ni Ad	itle: lame: ddress: ity-St-Zip:	() (Change () Addition	
Title: Name: Address: City-St-Zip:	D&O () I HAAKE, ARNOLE 1255 CREEKSID NAPLES, FL 34	E PARKWAY	N: Ac	itle: lame: ddress: ity-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () I MAGNUS, JAME: 1255 CREEKSID NAPLES, FL 34	E PARKWAY	Ni Ad	ame: ddress:	D (X) WHITNEY, SCO [*] 1255 CREEKSIC NAPLES, FL 34	DE PARKWAY	
Title: Name: Address: City-St-Zip:	D () I SCOLA, VINCEN 1255 CREEKSID NAPLES, FL 34	E PARKWAY	N: Ac	ddress:	D (X) AWERKAMP, TE 1255 CREEKSID NAPLES, FL 34	DE PARKWAY	
Title: Name: Address: City-St-Zip:	D () I WEYL, THOMAS 1255 CREEKSID NAPLES, FL 34	E PARKWAY	N: Ad	ddress:	D (X) DUGAN, DANIEL 1255 CREEKSIE NAPLES, FL 34	DE PARKWAY	
Title: Name: Address: City-St-Zip:	D (X) I WHITNEY, SCOT 1255 CRREKSID NAPLES, FL 34	E PARWAY	N: Ad	itle: lame: ddress: ity-St-Zip:	() (Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD M. SHULTZ EVP 03/30/2007