2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 01, 2006
Secretary of State

DOCUMENT# P02000038195

Entity Name: UNITED HERITAGE BANKSHARES OF FLORIDA, INC.

Current Principal Place of Business:

640 EAST SR 434
SUITE 2000
LONGWOOD, FL 32750

New Principal Place of Business:

1411 EDGEWATER DR
SUITE 100
ORLANDO, FL 32804

Current Mailing Address:

640 EAST SR 434
SUITE 2000
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 04-3691059 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POWERS, DAVID G
1411 EDGEWATER DR
SUITE 100
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

POWERS, DAVID G
640 EAST S.R. 434
LONGWOOD, FL 32750 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: _____ 08/01/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: HEWITT, JAMES
Address: 1411 EDGEWATER DR SUITE 100
City-St-Zip: ORLANDO, FL 32804

Title: PSD ( ) Delete
Name: POWERS, DAVID G
Address: 1411 EDGEWATER DR SUITE 100
City-St-Zip: ORLANDO, FL 32804

Title: VCD ( ) Delete
Name: HATTAWAY, J.M.
Address: 840 WATERWAY PLACE
City-St-Zip: LONGWOOD, FL 32750

Title: T ( ) Delete
Name: TYLER, SHIRLEY
Address: 1411 EDGWATER DR SUITE 100
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PSD (X) Change ( ) Addition
Name: POWERS, DAVID G
Address: 640 EAST S.R. 434
City-St-Zip: LONGWOOD, FL 32750

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: TYLER, SHIRLEY
Address: 640 EAST S.R. 434
City-St-Zip: LONGWOOD, FL 32750

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: SHIRLEY TYLER EVP 08/01/2006
Electronic Signature of Signing Officer or Director — Date