

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130234

FILED  
Apr 10, 2005  
Secretary of State

Entity Name: FLORIDIAN COMMUNITY BANK, INC.

## Current Principal Place of Business:

5599 S UNIVERSITY DR  
DAVIE,

## New Principal Place of Business:

5599 S UNIVERSITY DR  
DAVIE, FL 33328 US

## Current Mailing Address:

5599 S UNIVERSITY DR  
DAVIE,

## New Mailing Address:

5599 S UNIVERSITY DR  
DAVIE, FL 33328 US

FEI Number: 65-1107498

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

ALONSO, ULISES I VP  
599 RACQUET CLUB RD  
UNIT 66  
WESTON, FL 33326 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: ULISES I. ALONSO

04/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CUTCHENS, DOUGLAS  
Address: 1150 SOUTHLAKE DR  
City-St-Zip: HOLLYWOOD, FL 33019

Title: D ( ) Delete  
Name: FERNANDEZ, MIKE  
Address: 2515 MONTCLAIR CIR  
City-St-Zip: WESTON, FL 33327

Title: D ( ) Delete  
Name: GEISERMAN, ROBERT  
Address: 5599 S. UNIVERSITY DR  
City-St-Zip: DAVIE, FL 33328

Title: D ( ) Delete  
Name: GOODMAN, PARRY  
Address: 5905 LUCKIE ROAD  
City-St-Zip: WESTON, FL 33331

Title: D ( ) Delete  
Name: KORNAHRENS, ROBERT  
Address: 4000 NE 31ST AVENUE  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: D ( ) Delete  
Name: LEGGET, JEFFREY  
Address: 9050 NW 68TH CT  
City-St-Zip: PARKLAND, FL 33067

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ZINN, DAVID  
Address: 20800 NW 2ND AVENUE  
City-St-Zip: MIAMI, FL 33169 US

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID ZINN

D

04/10/2005

Electronic Signature of Signing Officer or Director

Date