2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000134986

Entity Name: CENTERSTATE BANK OF FLORIDA

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1101 FIRST ST S WINTER HAVEN, FL 33880 **Current Mailing Address: New Mailing Address:** 1101 FIRST ST S WINTER HAVEN, FL 33880 FEI Number: 59-3618173 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: 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: 04/25/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BLANCHARD, G. ROBERT JR Name: Name: 1414 SWANN AVE, STE 201 Address: Address: City-St-Zip: TAMPA, FL 33606 City-St-Zip: Title: Title: () Delete () Change () Addition CAREFOOT, GEORGE Name: Name: PO BOX 188 Address: Address: HAINES CITY, FL 33845 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition DONLEY, TERRY W Name: Name: 2235 CRUMP RD Address: Address: City-St-Zip: WINTER HAVEN, FL 33881 City-St-Zip: Title: () Delete Title: () Change () Addition FOSTER, FRANK M JR Name: Name: Address: PO BOX 2762 Address: City-St-Zip: LAKELAND, FL 33806 City-St-Zip: Title: Title: () Delete () Change () Addition IRBY, TIMOTHY A Name: Name: PO BOX 192 Address: Address: WINTER HAVEN, FL 33883 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition Name: MAXWELL, LAWRENCE W Name: Address: PO BOX 5252 Address: City-St-Zip: City-St-Zip: LAKELAND, FL 33807

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: STEPHEN D. YOUNG CFO 04/25/2005