

2006 FOR PROFIT CORPORATION ANNUAL REPORT

03-17-2006 90132 031 ***150.00
P04000007635

DOCUMENT # P04000007635 1. Entity Name AMERICAN ENTERPRISE BANK OF FLORIDA					
Principal Place of Business 4655 SALISBURY RD, STE 100 JACKSONVILLE, FL			Mailing Address 4655 SALISBURY RD, STE 100 JACKSONVILLE, FL		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 20-0642557					
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
Name BROWN, BENNETT			Name BROWN, BENNETT		
Street Address (P.O. Box Number is Not Acceptable) 4655 SALISBURY ROAD			Street Address (P.O. Box Number is Not Acceptable) 4655 SALISBURY ROAD		
Suite SUITE 100			Suite SUITE 100		
City JACKSONVILLE			City JACKSONVILLE		
State FL			State FL		
Zip Code 32256			Zip Code 32256		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Bennett Brown</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		BENNETT BROWN <small>(NOTE: Registered Agent signature required when reinstating)</small>		3-9-06 <small>DATE</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE	D	<input type="checkbox"/> Delete			
NAME	BROWN, BENNETT				
STREET ADDRESS	3007 FOREST CIR				
CITY-ST-ZIP	JACKSONVILLE, FL 32257				
TITLE	D	<input type="checkbox"/> Delete			
NAME	BRYAN, CARTER				
STREET ADDRESS	4703 ORTEGA BLVD				
CITY-ST-ZIP	JACKSONVILLE, FL 32210				
TITLE	D	<input type="checkbox"/> Delete			
NAME	LAFAYE, AL				
STREET ADDRESS	20 N BARTRAM TRAIL				
CITY-ST-ZIP	JACKSONVILLE, FL 32259				
TITLE	D	<input type="checkbox"/> Delete			
NAME	MCGHEE, SUTTON JR				
STREET ADDRESS	4329 GREAT OAKS LANE				
CITY-ST-ZIP	JACKSONVILLE, FL 32207				
TITLE	D	<input type="checkbox"/> Delete			
NAME	REGAS, CHRIS				
STREET ADDRESS	9230 BEAUCLERC CIR E				
CITY-ST-ZIP	JACKSONVILLE, FL 32257				
TITLE	D	<input type="checkbox"/> Delete			
NAME	SMITH, V. HAWLEY JR				
STREET ADDRESS	2787 FOREST CIR				
CITY-ST-ZIP	JACKSONVILLE, FL 32257				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Bennett Brown</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		BENNETT BROWN		3-9-06 <small>Date</small>	
				904/281-1900 <small>Daytime Phone #</small>	

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA



01312006 Chg-P CR2E034 (11/05)

4. FEI Number
20-0642557

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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Suite SUITE 100

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State FL

Zip Code 32256

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SIGNATURE *Bennett Brown*

BENNETT BROWN

3-9-06

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Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

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STREET ADDRESS 3007 FOREST CIR

CITY-ST-ZIP JACKSONVILLE, FL 32257

TITLE D

NAME BRYAN, CARTER

STREET ADDRESS 4703 ORTEGA BLVD

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TITLE ☐ Change ☐ Addition

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STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

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