2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000007635

Entity Name: AMERICAN ENTERPRISE BANK OF FLORIDA

FILED Jan 30, 2009 Secretary of State

Ourself Brigain at Black of Business				New Principal Place of Business		
Current Principal Place of Business:				New Principal Place of Business:		
	RWOOD PARI /ILLE, FL 3225					
Current Mailing Address:				New Mailing Address:		
10611 DEERWOOD PARK BLVD. JACKSONVILLE, FL 32256						
FEI Number: 20-0642557 FEI Number Applied For () FEI Nu			FEI Num	mber Not Applicable () Certificate of Status Desired (X)		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
BROWN, BENNETT 4655 SALISBURY RD, STE 100 JACKSONVILLE, FL 32256 US				BROWN, BENNETT 10611 DEERWOOD PARK BLVD. JACKSONVILLE, FL 32256 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:				01/30/2009		
	Electroni	c 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 () BROWN, BENNE 3007 FOREST C JACKSONVILLE	IR		Title: Name: Address: City-St-Zip:	(()Change ()Addition
Title: Name: Address: City-St-Zip:	D () BRYAN, CARTER 4703 ORTEGA E JACKSONVILLE	SLVD		Title: Name: Address: City-St-Zip:	(()Change ()Addition
Title: Name: Address: City-St-Zip:	D () LAFAYE, AL 20 N BARTRAM JACKSONVILLE			Title: Name: Address: City-St-Zip:	LAFAYE, AL 208 N BARTE	(X) Change () Addition RAM TRAIL LE, FL 32259
Title: Name: Address: City-St-Zip:	D () MCGEHEE, SUT 4329 GREAT OA JACKSONVILLE	KS LANE		Title: Name: Address: City-St-Zip:	(()Change ()Addition
Title: Name: Address: City-St-Zip:	D () REGAS, CHRIS 9230 BEAUCLEF JACKSONVILLE			Title: Name: Address: City-St-Zip:	MARTIN, RIC 7990 HUNTE	(X) Change () Addition HARD RS GROVE ROAD .LE, FL 32256
Title: Name: Address: City-St-Zip:	D () I SMITH, V. HAWL 2767 FOREST O JACKSONVILLE	IR		Title: Name: Address: City-St-Zip:	(() Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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: BENNETT BROWN D 01/30/2009