2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013427

Entity Name: AMERICAN ENTERPRISE BANKSHARES, INC.

FILED Jan 30, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
4655 SALISBURY ROAD SUITE 100 JACKSONVILLE, FL 32256				10611 DEERWOOD PARK BLVD. JACKSONVILLE, FL 32256			
Current Mailing Address:				New Mailing Address:			
4655 SALISBURY ROAD SUITE 100 JACKSONVILLE, FL 32256				10611 DEERWOOD PARK BLVD. JACKSONVILLE, FL 32256			
FEI Number:	20-2293431	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status	Desired (X)
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	New Registered Ag	ent:
SUITE 100 JACKSON\	SBURY ROAD /ILLE, FL 322: named entity s	56 US ubmits this statement for the p	urpose o	JACKSON\	RWOOD PAF /ILLE, FL 322	256 US	gent, or both,
SIGNATURE:				01/30/2009			
		ic Signature of Registered Age	nt			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, BENNI 3007 FOREST O JACKSONVILLE	CIRCLE		Title: Name: Address: City-St-Zip:	()) Change() Addition	
Title: Name: Address: City-St-Zip:	D () BRYAN, CARTE 4703 ORTEGA E JACKSONVILLE	BOULEVARD		Title: Name: Address: City-St-Zip:	()) Change () Addition	
Title: Name: Address: City-St-Zip:	D () LAFAYE, AL 208 NORTH BAI JACKSONVILLE			Title: Name: Address: City-St-Zip:	()) Change () Addition	
Title: Name: Address: City-St-Zip:	D () MCGEHEE, SUT 4329 GREAT OA JACKSONVILLE	AKS LANE		Title: Name: Address: City-St-Zip:	()) Change () Addition	
Title: Name: Address: City-St-Zip:	D () MARTIN, RICHA 7990 HUNTERS JACKSONVILLE	GROVE ROAD		Title: Name: Address: City-St-Zip:	()) Change () Addition	
Title: Name: Address: City-St-Zip:	REGAS, CHRÌŚ	Delete RC CIRCLE EAST :, FL 32257		Title: Name: Address: City-St-Zip:	D (X SMITH, HAWLE 1 SAN JOSE P JACKSONVILL	LACE #7	

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