2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000037186

Entity Name: FIRST FEDERAL OF FLORIDA, INC.

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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PO BOX 855

SHALIMAR, FL 325790855 US

Current Mailing Address: New Mailing Address:

PO BOX 855

SHALIMAR, FL 325790855 US

FEI Number: 55-0892246 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:

BREAZEALE II, B. T. BREAZEALE II, B. T 39 MAPLE AVE 22 SHERWOOD DRIVE

SHALIMAR, FL 32579 US SHALIMAR, FL 32579 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: 04/25/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

HALEY, EDWARD P HALEY, EDWARD P Name: Name: 900 NORTH SHORE DRIVE STE 109 Address: Address:

900 NORTH SHORE DRIVE

City-St-Zip: LAKE BLUFF, IL 60044 City-St-Zip: LAKE BLUFF, IL 60044

() Delete Title: VΡ Title: VΡ (X) Change () Addition

Name: HALEY, ANDREW M Name: HALEY, ANDREW M

900 NORTH SHORE DRIVE 900 NORTH SHORE DRIVE STE 109 Address: Address:

LAKE BLUFF, IL 60044 LAKE BLUFF, IL 60044 City-St-Zip: City-St-Zip:

Title: Title: () Delete VΡ (X) Change () Addition

BREAZEALE II, B. T Name: BREAZEALE II, B. T Name: 22 SHERWOOD DRIVE 39 MAPLE AVENUE Address: Address: City-St-Zip: SHALIMAR, FL 32579 City-St-Zip: SHALIMAR, FL 32579

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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.

VΡ SIGNATURE: B. THOMAS BREAZEALE II 04/25/2006