## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000062680

City-St-Zip:

FILED Feb 25, 2009 Secretary of State

Entity Name: BUSINESS BANK OF FLORIDA, CORP.	
Current Principal Place of Business:	New Principal Place of Business:
340 NORTH HARBOR CITY BLVD MELBOURNE, FL 32935	
Current Mailing Address:	New Mailing Address:
340 NORTH HARBOR CITY BLVD MELBOURNE, FL 32935	
FEI Number: 84-1702404 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:
KOEHNE, WILLIAM C 340 NORTH HARBOR CITY BLVD MELBOURNE, FL 32935 US	WAGNER, JEFFRY T 340 NORTH HARBOR CITY BLVD MELBOURNE, FL 32935 US
The above named entity submits this statement for the pu in the State of Florida.	rpose of changing its registered office or registered agent, or both,
SIGNATURE: JEFFRY T WAGNER	02/25/2009
Electronic Signature of Registered Agen	nt Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: D ( ) Delete Name: BURKLE, ANDREW C JR. Address: 14570 SHIRE COURT City-St-Zip: NOVELTY, OH 44072	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: ( ) Delete Name: Address: City-St-Zip:	Title: C/D ( ) Change (X) Addition Name: ZUHEIR, SOFIA Address: 225 STANBERY AVENUE City-St-Zip: COLUMBUS, OH 43209
Title: ( ) Delete Name: Address: City-St-Zip:	Title: D ( ) Change (X) Addition Name: WHITTAKER, KENNETH A Address: 670 ROSSMOOR CIRCLE City-St-Zip: MELBOURNE, FL 32940
Title: ( ) Delete Name: Address:	Title: T/S ( ) Change (X) Addition Name: WAGNER, JEFFRY T Address: 7667 N WICKHAM RD UNIT 516

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.

City-St-Zip:

MELBOURNE, FL 32940

SIGNATURE: JEFFRY T WAGNER T/S 02/25/2009