

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90111 045 ***150.00

DOCUMENT # P05000124565					
1. Entity Name FLORIDIAN FINANCIAL GROUP, INC.					
Principal Place of Business 299 WEST GRANADA, SUITE C ORMOND BEACH, FL 32174			Mailing Address 299 WEST GRANADA, SUITE C ORMOND BEACH, FL 32174		
2. Principal Place of Business - No P.O. Box # 1696 CLYDE MORRIS		3. Mailing Address 1696 N. CLYDE MORRIS			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State DAYTONA BEACH, FL.		City & State DAYTONA BEACH, FL.		4. FEI Number 20-4539279	
Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip 32117		Country USA		Zip 32117	
Country USA		Country USA		Country USA	
6. Name and Address of Current Registered Agent WATERS, JOHN D 299 W. GRANADA BLVD. STE C ORMOND BEACH, FL 32174			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable) 1696 N. CLYDE MORRIS BLD.			Street Address (P.O. Box Number is Not Acceptable) 1696 N. CLYDE MORRIS BLD.		
City DAYTONA BEACH			City DAYTONA BEACH		Zip Code 32117
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: <u>JOHN D. WATERS, CFO</u>		<u>[Signature]</u>		DATE: <u>4/10/08</u>	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when re-registering)		DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	DC	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DARGAN, THOMAS H JR		NAME	See Attached	
STREET ADDRESS	117 GOLF VIEW LANE		STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH, FL 32176		CITY-ST-ZIP		
TITLE	DP	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BULKO, KEITH A		NAME		
STREET ADDRESS	63 COQUINA RIDGE WAY		STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH, FL 32174		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURKETT, CHARLES DR.		NAME		
STREET ADDRESS	6 CROOKED BRIDGE WAY		STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH, FL 32174		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAILEY, TRUMAN E		NAME		
STREET ADDRESS	936 JOHN ANDERSON DRIVE		STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH, FL 32176		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAHAM, JOHN JR		NAME		
STREET ADDRESS	11A BUCKSKIN LANE		STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH, FL 32174		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANSBERRY, BLAINE STAED		NAME		
STREET ADDRESS	1980 S. PENINSULA DRIVE		STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH, FL 32118		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: <u>Thomas H. Dargan, President/COO</u>		DATE: <u>4/22/08</u>		Daytime Phone #	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Thomas H. Dargan, President/COO					

40079980



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ATTACHMENT

2008 FOR PROFIT CORPORATION
ANNUAL REPORT
FLORIDIAN FINANCIAL GROUP

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D

Anderson, Richard A., Sr.
5108 Sail Wind Circle
Orlando, FL 32810

D/P/COO

Dargan, Thomas H.
140 John Anderson Drive
Ormond Beach, FL 32176

D

Crider, William F.
11252 Clapp Simms Duda Rd.
Orlando, FL 32832

D

Bulko, Keith A.
63 Coquina Ridge Way
Ormond Beach, FL 32174

D

Peacock, W. Warner
1089 W. Morse Blvd., Suite D
Winter Park, FL 32789

D

Marrese, Roxy, Jr.
6 Moss Point Drive
Ormond Beach, FL 32174

D

Sandefur, Stanley H.
181 Timacuan Blvd.
Lake Mary, FL 32714

D

Gailey, Truman, Jr.
936 John Anderson Drive
Ormond Beach, FL 32176

D

Hurt, Jennings L., III
201 E. Pine Street, 15th Floor
P.O. Box 4940
Orlando, FL 32802-4940

D/VC

McClanahan, Michael L.
175 Timacuan Blvd.
Lake Mary, FL 32746

D/C/CEO

Brinkley, Charlie W., Jr.
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Lake Mary, FL 32746