

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000011516

FILED
Apr 03, 2008
Secretary of State

Entity Name: NORTHSTAR BANKING CORPORATION

Current Principal Place of Business:

400 NORTH ASHLEY DR. SUITE 1400
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

400 NORTH ASHLEY DR. SUITE 1400
TAMPA, FL 33602

New Mailing Address:

FEI Number: 20-4212125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IGLER & DOUGHERTY, P.A.
2457 CARE DRIVE
TALLAHASSEE, FL 33626 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WEIGEL, H. MONTY
Address: 6451 RENWICK CIRCLE
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: BAREFIELD, SIMONE GANS
Address: 7445 QUAIL MEADOW ROAD
City-St-Zip: PLANT CITY, FL 33565

Title: D () Delete
Name: HASHAGEN, JOHN
Address: 6624 TAEDA DRIVE
City-St-Zip: SARASOTA, FL 34241

Title: D () Delete
Name: PATEL, KIRAN
Address: 11609 CARROLWOOD DRIVE
City-St-Zip: TAMPA, FL 33618

Title: D () Delete
Name: PATEL (PARESH), PARESHBHAI
Address: 1520 GULF BOULEVARD #1706
City-St-Zip: S. HARBOUR, FL 34695

Title: D () Delete
Name: POLITIS, GERGORY
Address: 965 S. BAYSHORE BLVD
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: H MONTY WEIGEL

PD

04/03/2008

Electronic Signature of Signing Officer or Director

Date