

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000046257

FILED
Sep 20, 2007
Secretary of State

Entity Name: CENTERSTATE BANK MID FLORIDA

Current Principal Place of Business:

1211 WEST NORTH BLVD
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

1211 WEST NORTH BLVD
LEESBURG, FL 34748

New Mailing Address:

P O BOX 490558
LEESBURG, FL 34749

FEI Number: 59-3739327

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:

ELIZABETH, BOWEN J
1211 WEST NORTH BLVD
LEESBURG, FL 34748 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: ELIZABETH J BOWEN

09/20/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BUCKNER, DON
Address: 27137 HWY 33
City-St-Zip: OKAHUMPKA, FL 34762

Title: D () Delete
Name: PIERSON, TIMOTHY A
Address: 1211 WEST NORTH BLVD
City-St-Zip: LEESBURG, FL 34748

Title: D () Delete
Name: LANGLEY, MICHAEL R
Address: 17628 US HWY 27
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: LUNDERSTADT, SR., CARL H
Address: 39548 CREST COURT
City-St-Zip: LADY LAKE, FL 32159

Title: D () Delete
Name: MOBLEY, BILL C
Address: 3793 PICCIOLA RD
City-St-Zip: LEESBURG, FL 34748

Title: D () Delete
Name: MUNNS, RULON D
Address: 2601 TECHNOLOGY DRIVE
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STOKES, BERYL III
Address: 135 W DIXIE AVENUE
City-St-Zip: LEESBURG, FL 34748

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

Title: D (X) Change () Addition
Name: LANGLEY, MICHAEL R
Address: 10392 LAKE MINNEOLA SHORES
City-St-Zip: CLERMONT, FL 34711

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: BERYL STOKES, III

D

09/20/2007

Electronic Signature of Signing Officer or Director

Date