

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000115536

FILED
Feb 21, 2007
Secretary of State

Entity Name: FLORIDA SHORES BANK - SOUTHEAST

Current Principal Place of Business:

400 FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

New Principal Place of Business:

400 N. FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

Current Mailing Address:

400 FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

New Mailing Address:

400 N. FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

FEI Number: 20-5502147

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:

KAPER, NORLAN D CFO
400 N. FEDERAL HIGHWAY
POMPANO, FL 33062 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: N. DALE KAPER

02/21/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DEVISSER, LEON P
Address: 5816 N.W. 26TH COURT
City-St-Zip: BOCA RATON, FL 33496

Title: D () Delete
Name: ERNSTEEN, JOSEPH E
Address: 7063 BRUNSWICK CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: FURMAN, FRANK H JR
Address: 900 NE 3RD ST REET
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: HICKMAN, STEVEN D
Address: 7210 E CYPRESSHEAD DRIVE
City-St-Zip: PARKLAND, FL 33067

Title: D () Delete
Name: KAPER, N. DALE
Address: 106 EAST 8TH STREET
City-St-Zip: HOLLAND, MI 49423

Title: D (X) Delete
Name: KEITH, WILLIAM V
Address: 301 EAST ATLANTIC BOULEVARD
City-St-Zip: POMPANO BEACH, FL 33060

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 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: N. DALE KAPER

CFO

02/21/2007

Electronic Signature of Signing Officer or Director

Date