

FILED
May 31, 2007 8:00 am
Secretary of State

05-09-2007 90107 050 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT-**

DOCUMENT # P06000140367																																																																																																									
1. Entity Name CENTURY BANCSHARES OF FLORIDA, INC.																																																																																																									
Principal Place of Business 716 WEST FLETCHER AVENUE TAMPA, FL 33612			Mailing Address 716 WEST FLETCHER AVENUE TAMPA, FL 33612																																																																																																						
2. Principal Place of Business - No P.O. Box #		3. Mailing Address																																																																																																							
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																							
City & State		City & State																																																																																																							
Zip	Country	Zip	Country	4. FEI Number 01222007 Chg-P CR2E034 (12/06)																																																																																																					
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable																																																																																																					
6. Name and Address of Current Registered Agent VIVERO, JOSE 716 WEST FLETCHER AVENUE TAMPA, FL 33612			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____																																																																																																						
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: DATE: 1/23/07																																																																																																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="2" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 85%;">NAME</td> <td style="width: 15%;">TITLE</td> <td style="width: 85%;">NAME</td> </tr> <tr> <td></td> <td>CLARE, GLENDA G <input type="checkbox"/> Delete</td> <td>DCP</td> <td>Jose Vivero <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>716 WEST FLETCHER AVENUE</td> <td>STREET ADDRESS</td> <td>716 west Fletcher Ave</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TAMPA, FL 33612</td> <td>CITY-ST-ZIP</td> <td>Tampa, FL 33612</td> </tr> <tr> <td></td> <td>D <input type="checkbox"/> Delete</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>COUCH, THEODORE J SR.</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>716 WEST FLETCHER AVENUE</td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TAMPA, FL 33612</td> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td></td> <td>D <input type="checkbox"/> Delete</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>EUBANKS, W. HUNTER</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>716 WEST FLETCHER AVENUE</td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TAMPA, FL 33612</td> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td></td> <td>D <input type="checkbox"/> Delete</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>HALL, LAURENCE S JR.</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>716 WEST FLETCHER AVENUE</td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TAMPA, FL 33612</td> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td></td> <td>D <input type="checkbox"/> Delete</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>VALIENTE, JOSE E</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>716 WEST FLETCHER AVENUE</td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TAMPA, FL 33612</td> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td></td> <td>DCP <input checked="" type="checkbox"/> Delete</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>VIVERO, JOSE</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>716 WEST FLETCHER AVENUE</td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TAMPA, FL 33612</td> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		TITLE	NAME	TITLE	NAME		CLARE, GLENDA G <input type="checkbox"/> Delete	DCP	Jose Vivero <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS	716 WEST FLETCHER AVENUE	STREET ADDRESS	716 west Fletcher Ave	CITY-ST-ZIP	TAMPA, FL 33612	CITY-ST-ZIP	Tampa, FL 33612		D <input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		COUCH, THEODORE J SR.			STREET ADDRESS	716 WEST FLETCHER AVENUE	STREET ADDRESS		CITY-ST-ZIP	TAMPA, FL 33612	CITY-ST-ZIP			D <input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		EUBANKS, W. HUNTER			STREET ADDRESS	716 WEST FLETCHER AVENUE	STREET ADDRESS		CITY-ST-ZIP	TAMPA, FL 33612	CITY-ST-ZIP			D <input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		HALL, LAURENCE S JR.			STREET ADDRESS	716 WEST FLETCHER AVENUE	STREET ADDRESS		CITY-ST-ZIP	TAMPA, FL 33612	CITY-ST-ZIP			D <input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		VALIENTE, JOSE E			STREET ADDRESS	716 WEST FLETCHER AVENUE	STREET ADDRESS		CITY-ST-ZIP	TAMPA, FL 33612	CITY-ST-ZIP			DCP <input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		VIVERO, JOSE			STREET ADDRESS	716 WEST FLETCHER AVENUE	STREET ADDRESS		CITY-ST-ZIP	TAMPA, FL 33612	CITY-ST-ZIP	
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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 attached form with an address, with all other like empowered. SIGNATURE: DATE: 1/23/07 DAYTIME PHONE: 813-961-3300																																																																																																									

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