2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000009394

Entity Name: STERLING BANCGROUP, INC.

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1189 HYPOLUXO ROAD LANTANA, FL 33462 **Current Mailing Address: New Mailing Address:** 1189 HYPOLUXO ROAD LANTANA, FL 33462 US FEI Number: 31-1428066 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHOFIELD, WILLIAM A STERLING BANCGROUP, INC. 1189 HYPOLUXO RD LANTANA, FL 33462 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CALLANAN, DANIEL P Name: Name: 4120 GREENSVIEW DR. Address: Address: City-St-Zip: COLUMBUS, OH 43220 City-St-Zip: CDP Title: Title: () Delete () Change () Addition Name: BAVELIS, GEORGE A Name: 500 S. OCEAN BLVD., #1007 Address: Address: BOCA RATON, FL 33432 City-St-Zip: City-St-Zip: Title: Title: DS () Delete () Change () Addition MALAS, ERNIE Name: Name: 2481 STONEHAVEN PLACE Address: Address: City-St-Zip: COLUMBUS, OH 43220 City-St-Zip: Title: () Delete Title: () Change () Addition VOGEL, THOMAS A Name: Name: Address: 305 S. ANDREWS AVE., SUITE 126 Address: City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: Title: DT Title: () Delete () Change () Addition SOLOMON, SANFORD Name: Name: 68 SOUTH 4TH STREET Address: Address: City-St-Zip: COLUMBUS, OH 43215 City-St-Zip: Title: () Delete Title: () Change () Addition Name: CLARKSON, PETER Name: 3030 SCIOTO ESTATES COURT Address: Address: City-St-Zip: City-St-Zip: COLUMBUS, OH 43221

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: WILLIAM A SCHOFIELD CFO 04/27/2007