

FILED
FEB - 14 PM 3:00
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SECRET
TALLAHASSEE, FLORIDA

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NICHOLAS WEIDE

... 941 435-3889

COLLIER PRIVATE INVESTMENTS

400 5TH AVE SOUTH

NAPLES

FL 34102

RA
change

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-02/27/97--01036--008
*****35.00 *****35.00

C. TAX _____
 FILING _____
 R. AGENT FEE 35 _____
 TOTAL _____
 N. BANK 35 _____
 PAY TO THE ORDER OF _____
 REFUND _____

Nature
Accessibility

2 / 17 / 97

P00H

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V.P.

Acknowledgement

W.P. Verityor

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: COASTAL BANCORP, INC.
2. The mailing address of the corporation is: 4001 TAMiami TRAIL NO STE 210
NAPLES, FL 34103
3. Date of incorporation/qualification: JAN 23, 1997 Document number: 597A00004575
4. The name and address of the current registered agent and office:

W. JONATHAN WRIDE

4001 TAMiami TRAIL NO STE 210
NAPLES, FL 34103

5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

NICHOLAS J. WRIDE

4001 TAMiami TRAIL NO STE 210
NAPLES, FL 34103

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

(Signature of an officer, chairman or vice chairman of the board)

2-14-97
(Date)

W. JONATHAN WRIDE

PRESIDENT

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Nicholas Wride
(Signature of Registered Agent)

2-14-97
(Date)

NICHOLAS J WRIDE
If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)