

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000014103

Entity Name: FLORIDA BANCSHARES INC.

FILED  
Apr 16, 2009  
Secretary of State

## Current Principal Place of Business:

13315 US HWY 301  
DADE CITY, FL 33525

## New Principal Place of Business:

## Current Mailing Address:

13315 US HWY 301  
DADE CITY, FL 33525

## New Mailing Address:

FEI Number: 59-3434888

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERTS, J. LAMAR  
13315 US HWY 301  
DADE CITY, FL 33525 US

## Name and Address of New Registered Agent:

SUMNER, ROBERT  
13315 US HWY 301  
DADE CITY, FL 33525 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: ROBERT SUMNER

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GIBBS, A. P.  
Address: P O BOX 618  
City-St-Zip: DADE CITY, FL 33526

Title: P ( ) Delete  
Name: LAMAR, ROBERTS J  
Address: 5340 EPPING LANE  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: D ( ) Delete  
Name: ANDERSON, DUANE  
Address: P O BOX 277 N/A  
City-St-Zip: DADE CITY, FL 33526

Title: D ( ) Delete  
Name: HENSON, JOHN E  
Address: P O BOX 517 N/A  
City-St-Zip: ZEPHYRHILLS, FL 33539

Title: D ( ) Delete  
Name: MANN, MARLENE H  
Address: 39151 WOODLAND DR  
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: D ( ) Delete  
Name: MIDILI, PAUL  
Address: P.O. BOX 162  
City-St-Zip: SAN ANTONIO, FL 335760162

## 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 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: KERRY MARK WESTBROOK

SVP

04/16/2009

Electronic Signature of Signing Officer or Director

Date