2010 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 18, 2010
Secretary of State

DOCUMENT# P98000042504

Entity Name: CNLBANCSHARES, INC.

Current Principal Place of Business:

450 SOUTH ORANGE AVENUE
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4968
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 59-3544720 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLLINS, C. MICHAEL
1007 TEMPLE GROVE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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: C. MICHAEL COLLINS

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: COLLINS, C. MICHAEL
Address: 1007 TEMPLE GROVE
City-St-Zip: WINTER PARK, FL 32789

Title: CB
Name: SENEFF, JAMES
Address: 1300 SUMMERLAND AVE
City-St-Zip: WINTER PARK, FL 32789

Title: VCB
Name: HANNA, LEE
Address: 13570 MANDARIN RD
City-St-Zip: JACKSONVILLE, FL 32223

Title: VCB
Name: BOURNE, ROBERT
Address: 1411 VIA TUSCANY
City-St-Zip: WINTER PARK, FL 32789

Title: D
Name: NEWMAN, CHARLES
Address: 24769 HARBOUR VIEW DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D
Name: SCHMIDT, TRACY
Address: 6055 LOUISE COVE DRIVE
City-St-Zip: WINDERMERE, FL 34786

I hereby 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 all other like empowered.

SIGNATURE: CINDY FIFE VP 10/18/2010

Electronic Signature of Signing Officer or Director — Date