

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P98000080697

**FILED**  
**Jul 11, 2007**  
**Secretary of State****Entity Name:** BANK OF FLORIDA CORPORATION**Current Principal Place of Business:**1185 IMMOKALEE RD.  
NAPLES, FL 34110 US**New Principal Place of Business:****Current Mailing Address:**110 EAST BROWARD BLVD.  
SUITE 100  
FORT LAUDERDALE, FL 33301 US**New Mailing Address:****FEI Number:** 59-3535315      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**YASSA, ARLETTE  
110 E. BROWARD BLVD.  
SUITE 100  
FORT LAUDERDALE, FL 33301 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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** CEOD ( ) Delete  
**Name:** MCMULLAN, MICHAEL PRES  
**Address:** 1185 IMMOKALEE RD.  
**City-St-Zip:** NAPLES, FL 34110**Title:** VC ( ) Delete  
**Name:** COX, JOE B  
**Address:** 1185 IMMOKALEE RD.  
**City-St-Zip:** NAPLES, FL 34110**Title:** D ( ) Delete  
**Name:** JAMES, JOHN B CAO  
**Address:** 1185 IMMOKALEE RD.  
**City-St-Zip:** NAPLES, FL 34110**Title:** DC ( ) Delete  
**Name:** PUTZIGER, MICHAEL T C  
**Address:** 99 HIGH STREET  
**City-St-Zip:** BOSTON, MA 02110**Title:** D ( ) Delete  
**Name:** MOON, HARRY K  
**Address:** 717 SE 2ND STREET  
**City-St-Zip:** FORT LAUDERDALE,, FL 33301**Title:** D ( ) Delete  
**Name:** KALOUST, ED  
**Address:** 777 S. HARBOR ISLAND BLVD, SUIT E 940  
**City-St-Zip:** TAMPA, FL 33602**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:** S (X) Change ( ) Addition  
**Name:** YASSA, ARLETTE  
**Address:** 110 E. BROWARD BLVD., SUITE 100  
**City-St-Zip:** FT. LAUDERDALE, FL 33301

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: JOHN B. JAMES

CAO

07/11/2007

Electronic Signature of Signing Officer or Director

Date