

DOCUMENT # P99000082771

1. Entity Name

CENTERSTATE BANKS OF FLORIDA, INC.

FILED
Jan 11, 2001 8:00 am
Secretary of State

01-11-2001 90044 027 ***150.00

Principal Place of Business

7722 SR 544 EAST
WINTER HAVEN FL 33881

Mailing Address

7722 SR 544 EAST
WINTER HAVEN FL 33881

2. Principal Place of Business

Suite, Apt. #, etc.

Suite 205

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

Suite 205

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3606741

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WHITE, JAMES H
7722 SR 544 EAST
WINTER HAVEN FL 33881

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PDC	☐ Delete
NAME	WHITE, JAMES H	
STREET ADDRESS	7722 SR 544 EAST #205	
CITY-ST-ZIP	WINTER HAVEN FL 33881	
TITLE	VS	☐ Delete
NAME	ANTAL, JAMES J	
STREET ADDRESS	7722 SR 544 AVE #205	
CITY-ST-ZIP	WINTER HAVEN FL 33881	
TITLE	D	☐ Delete
NAME	BLANCHARD, G. ROBERT SR	
STREET ADDRESS	1414 SWAN AVE #201	
CITY-ST-ZIP	TAMPA FL 33606	
TITLE	D	☐ Delete
NAME	DONLEY, TERRY W	
STREET ADDRESS	2235 CRUMP RD	
CITY-ST-ZIP	WINTER HAVEN FL 33881	
TITLE	D	☐ Delete
NAME	JUDGE, BRYAN W	
STREET ADDRESS	251 CRUMP RD	
CITY-ST-ZIP	KISSIMMEE FL 34744	
TITLE	D	☐ Delete
NAME	LUPFER, SAMUEL L	
STREET ADDRESS	222 CHURCH ST	
CITY-ST-ZIP	KISSIMMEE FL 34741	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JAMES J. ANTAL, SVP & CFO
 James J. Antal
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 8, 2001

Date

863-419-0833

Daytime Phone #

CR2E034 (10/00)