

01-19-2007 90033 001 ***150.00
P99000082771

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

07 JAN 31 PM 3:27

CLERK OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000082771 1. Entity Name CENTERSTATE BANKS OF FLORIDA, INC.	
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Principal Place of Business 1101 FIRST STREET SOUTH SUITE 202 WINTER HAVEN, FL 33880	Mailing Address 1101 FIRST STREET SOUTH SUITE 202 WINTER HAVEN, FL 33880
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DO NOT WRITE IN THIS SPACE



01102007 No Chg-P CR2E034 (11/05)

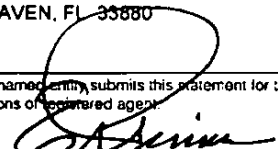
4. FEI Number 59-3606741	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PINNER, ERNEST S 1101 FIRST STREET SOUTH SUITE 202 WINTER HAVEN, FL 33880

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  ERNEST S. PINNER 1-10-07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

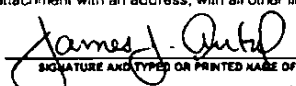
9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUPFER, SAMUEL L 222 CHURCH ST KISSIMMEE, FL 34741
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS ANTAL, JAMES J 7722 SR 544 AVE #205 WINTER HAVEN, FL 33881
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLANCHARD, G. ROBERT JR 1414 SWANN AVE, SUITE 201 TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DONLEY, TERRY W 2235 CRUMP RD WINTER HAVEN, FL 33881
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JUDGE, BRYAN W 251 CRUMP RD KISSIMMEE, FL 34744
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDC PINNER, ERNEST S 1101 FIRST STREET SOUTH WINTER HAVEN, FL 33880

\$71/31

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  JAMES J. ANTAL, SUP+CEO 1-10-07 863-293-2600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

*NOTE: REMAINING DIRECTORS LISTED ON REVERSE SIDE