

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000110234

Entity Name: LANDMARK BANK OF FLORIDA

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

544 S. WASHINGTON BLVD.
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5737
SARASOTA, FL 34277

New Mailing Address:

FEI Number: 65-0973600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUALE, THOMAS G
544 S. WASHINGTON BLVD.
SARASOTA, FL 34236 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: D () Delete
Name: DABNEY, THOMAS G
Address: 2033 WOOD STREET, SUITE 118
City-St-Zip: SARASOTA, FL 34237

Title: D () Delete
Name: GREENFIELD, STEVEN E
Address: 380 INTERSTATE BLVD., SUITE 204
City-St-Zip: SARASOTA, FL 34240

Title: D () Delete
Name: LANE, ROBERT J
Address: 1990 MAIN STREET, SUITE 801
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: STEELE, JOHN M
Address: 943 SOUTH BENEVA ROAD
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: SUPLEE, T. RAYMOND
Address: 800 SOUTH OSPREY AVE
City-St-Zip: SARASOTA, FL 34236

Title: DP () Delete
Name: QUALE, THOMAS G
Address: 544 SOUTH WASHINGTON BLVD
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: POWERS, SEAN P EVP/SL
Address: 544 S. WASHINGTON BLVD.
City-St-Zip: SARASOTA, FL 34236

Title: O (X) Change () Addition
Name: LONGABACH, JULIE K SVP/CFO
Address: 544 S. WASHINGTON BLVD
City-St-Zip: SARASOTA, FL 34236

Title: O (X) Change () Addition
Name: PEZZELLA, MARIO V SVP
Address: 544 S. WASHINGTON BLVD
City-St-Zip: SARASOTA, FL 34236

Title: O (X) Change () Addition
Name: JOHNSON, DOUGLAS J 1ST VP
Address: 544 SOUTH WASHINGTON BLVD
City-St-Zip: SARASOTA, FL 34236

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: JULIE K. LONGABACH

SVP

04/15/2009

Electronic Signature of Signing Officer or Director

Date