

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S30205

FILED
Jul 09, 2007
Secretary of State

Entity Name: STATEWIDE FINANCIAL CORPORATION

Current Principal Place of Business:

1819 MAIN STREET
SUITE 201
SARASOTA, FL 34236

New Principal Place of Business:

1819 MAIN STREET
SUITE 301
SARASOTA, FL 34236

Current Mailing Address:

1819 MAIN STREET
SUITE 201
SARASOTA, FL 34236

New Mailing Address:

1819 MAIN STREET
SUITE 301
SARASOTA, FL 34236

FEI Number: 59-3048150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VASSALLO, THOMAS M
1819 MAIN STREET
SUITE 201
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

VASSALLO, THOMAS M
1819 MAIN STREET
SUITE 301
SARASOTA, FL 34236 US

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: THOMAS M. VASSALLO

07/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VASSOLLO, THOMAS M
Address: 1819 MAIN STREET SUITE 201
City-St-Zip: SARASOTA, FL 34236

Title: VP () Delete
Name: DEVORE, ROBERT
Address: 1819 MAIN STREET SUITE 201
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: THOMAS M. VASSALLO

PRES

07/09/2007

Electronic Signature of Signing Officer or Director

Date