2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# V10056

FILED May 23, 2008 Secretary of State

Entity Name: VILLAGES BANCORPORATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1050 LAKE SUMTER LANDING THE VILLAGES, FL 32162 **Current Mailing Address: New Mailing Address:** 1050 LAKE SUMTER LANDING THE VILLAGES, FL 32162 US FEI Number: 59-3122966 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KILLINGSWORTH, T. M. HUDSON, BRIAN DESQ 1050 LAKE SUMTÉR LANDING 1028 LAKÉ SUMTER LANDING THE VILLAGES, FL 32162 THE VILLAGES, FL 32162 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: BRIAN D. HUDSON, ESQ. 05/23/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MORSE, MARK G Name: Name: 1020 LAKE SUMTER LANDING Address: Address: City-St-Zip: THE VILLAGES, FL 32162 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: WISE, JOHN F Name: 1020 LAKE SUMTER LANDING Address: Address: THE VILLAGES, FL 32162 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BRIDGES, CLIFTON L Name: Name: 6525 SUNNYSIDE DR Address: Address: City-St-Zip: LEESBURG, FL 34748 City-St-Zip: Title: () Delete Title: () Change () Addition LEVINE, MICHAEL S Name: Name: Address: 33835 OVERTON DRIVE Address: City-St-Zip: LEESBURG, FL 34788 City-St-Zip: Title: Title: () Delete () Change () Addition MORSE, H G Name: Name: 1020 LAKE SUMTER LANDING Address: Address: City-St-Zip: THE VILLAGES, FL 32162 US City-St-Zip: Title: () Delete Title: () Change () Addition SCHMID, DANNY A Name: Name: 04341 EMMAUS RD Address: Address: City-St-Zip: City-St-Zip: FRUITLAND PARK, FL 34731

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: MARK G. MORSE DIR 05/23/2008