## Edgar Filing: WALPOLE EDWIN E III - Form 4

WALPOLE Form 4	EDWIN E III										
November (	06, 2009										
FORM 4UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549Check this box if no longer subject to 								APPROVAL 3235-0287			
							Expires: Estimate burden h response	Expires:January 312005Estimated averageburden hours perresponse0.5			
1(b). (Print or Type	Responses)										
	Address of Reporting E EDWIN E III	Sy SI	2. Issuer Name <b>an</b> mbol EACOAST BA LORIDA [SBC	NKING		-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	(First) ( T BANKING ATION, P. O. BO2	(M 11	Date of Earliest T Ionth/Day/Year) I/06/2009	ransaction			X_ Director 10% Owner Officer (give title Other (specify below) below)				
STUART, I	If Amendment, D led(Month/Day/Yea	-	I		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Table I - Non-	Derivative	Securi	ities Ac	cquired, Disposed	of. or Benefic	ially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		3. ate, if Transactio Code		ies Ac sposed	quired of	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect		
Common Stock	11/06/2009		$G^{(1)}$	44,444	(D) A	\$ 0 (1)	238,374	D			
Common Stock							1,890	D (2)			
Common Stock							3,952	D <u>(3)</u>			
Common Stock							4,050	I	Held by Corporation		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / AddressDirector10% OwnerOfficerOtherWALPOLE EDWIN E III<br/>SEACOAST BANKING CORPORATION<br/>P. O. BOX 9012<br/>STUART, FL 34995XXXXSignatures<br/>Walpole, III11/06/2009

\*\*Signature of Reporting Person

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Date

(1) Gifted shares to grandchildren

- (2) Held in IRA
- (3) Held jointly with daughter

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.