FURST JEFFREY S

Form 4

October 09, 2009

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

response...

3235-0287

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Check this box if no longer

January 31, Expires: 2005

OMB APPROVAL

subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per

Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * **FURST JEFFREY S**

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

below)

Symbol

SEACOAST BANKING CORP OF FLORIDA [SBCF]

(Check all applicable)

(Last)

(First)

(Middle)

3. Date of Earliest Transaction

_X__ Director Officer (give title

10% Owner Other (specify

SEACOAST BANKING CORP. OF

(Street)

(State)

FLORIDA, P.O. BOX 9012

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

(Month/Day/Year)

10/07/2009

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

STUART, FL 34995

(City)

| (City) | (State) | (Z_1p) T_2 | able I - Non | -Derivative Securities Acquire | ed, Disposed of, o | r Beneficially | y Owned |
|------------|---------------------|--------------------|--------------|--------------------------------|--------------------|----------------|-----------|
| 1.Title of | 2. Transaction Date | 2A. Deemed | 3. | 4. Securities Acquired (A) or | 5. Amount of | 6. | 7. Nature |
| Security | (Month/Day/Year) | Execution Date, if | Transactio | orDisposed of (D) | Securities | Ownership | Indirect |
| (Instr. 3) | | any | Code | (Instr. 3, 4 and 5) | Beneficially | Form: | Beneficia |
| | | (Month/Day/Year) | (Instr. 8) | | Owned | Direct (D) | Ownershi |

Code V

Following or Indirect Reported (I) Transaction(s) (Instr. 4)

(Instr. 3 and 4)

or (D) Price Amount

(A)

2.6015

 $D^{(1)}$ 18,973.8946

10/07/2009 Stock

597.7789 A Α

Common Stock

Common

21,557.935 $D^{(2)}$

Common Stock

90,398.402 $D^{(3)}$

Common Stock

22,546.046

By Spouse (Delaine)

7. Nature of

Beneficial Ownership

(Instr. 4)

660

 $D^{(4)}$

Ι

Common Stock

Common Stock 54,190.598 D

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

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SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transac Code (Instr. 8 | 5. tionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 3 | ate | 7. Titl Amou Under Secur (Instr. | int of lying | 8. Price of Derivative Security (Instr. 5) | |
|---|---|--------------------------------------|---|------------------------------------|---|---------------------|--------------------|--|--|---|--|
| | | | | Code | V (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | |
|---|---------------|-----------|---------|-------|--|
| . 0 | Director | 10% Owner | Officer | Other | |
| FURST JEFFREY S SEACOAST BANKING CORP. OF FLORIDA P.O. BOX 9012 STUART, FL 34995 | X | | | | |

Signatures

Sharon Mehl as Power of Attorney for Jeffrey S.
Furst

**Signature of Reporting Person Date

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).
- (1) Held in Seacoast's Non-Employee Directors Deferred Compensation Plan

Reporting Owners 2

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- (2) Held in IRA
- (3) Held jointly with spouse.
- (4) Held jointly with mother.

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.