**HUDSON DALE M** 

Form 5

Common

Common

Stock

Stock

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820.9725 (3) D

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13,734 (4)

February 06, 2009

#### **OMB APPROVAL** FORM 5 **OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer **HUDSON DALE M** Symbol SEACOAST BANKING CORP OF (Check all applicable) FLORIDA [SBCF] (Middle) 3. Statement for Issuer's Fiscal Year Ended (Last) (First) \_X\_ Director \_X\_\_ 10% Owner \_X\_ Officer (give title Other (specify (Month/Day/Year) below) below) 12/31/2008 Vice Chairman of the Board SEACOAST BANKING CORP. OF FLORIDA, P.O. BOX 9012 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line) STUART. FLÂ 34995 Form Filed by One Reporting Person \_X\_ Form Filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 5. Amount of 1.Title of 2. Transaction Date 2A. Deemed 4. Securities 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction Acquired (A) or Securities Form: Direct Indirect (Instr. 3) Code Disposed of (D) Beneficially (D) or Beneficial (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned at end Indirect (I) Ownership of Issuer's (Instr. 4) (Instr. 4) (A) Fiscal Year or (Instr. 3 and 4) Amount (D) Price Common Â Â Â Â Â Â Â 136,295 (1) D Stock Common 1,456,121 Â Â Â Â Â Â Â D (2) Stock

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

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.

SEC 2270 (9-02)

D

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Derivative Security (Instr. 3)	Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)		Transaction Code (Instr. 8)	Number of Derivative	Expiration Day/	ate	Amour Underl Securit	nt of lying	8. Price of Derivative Security (Instr. 5)	
(mail: 3)	Derivative Security		(Monta Day, Tear)	(mod. 0)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				3 and 4)	(msu. 3)	
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
• 9		10% Owner	Officer	Other			
HUDSON DALE M SEACOAST BANKING CORP. OF FLORIDA P.O. BOX 9012 STUART, FL 34995	ÂX	ÂX	Vice Chairman of the Board	Â			
HUDSON MARY T SEACOAST BANKING CORP. OF FLORIDA P.O. BOX 9012 STUART, FL 34995	Â	ÂX	Â	Â			

## **Signatures**

Sharon Mehl as Power of Attorney for Dale M. Hudson	02/06/2009		
**Signature of Reporting Person	Date		
Sharon Mehl as Power of Attorney for Mary T. Hudson	02/06/2007		

### **Explanation of Responses:**

\*\*Signature of Reporting Person

- \* 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 jointly by both filers
- (2) Shares held by Monroe Partners, Ltd., a family partnershp

Reporting Owners 2

Date

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- (3) Represent shares held by Dale in the Company's Profit Sharing Plan as of December 31, 2008.
- (4) Held individually by Mary

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.