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SEACOAST BANKING CORP OF FLORIDA

Form 4

December 14, 2006

OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB** 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to **SECURITIES** Section 16. Form 4 or

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response...

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b).

(Print or Type Responses)

Stock

1. Name and Address of Reporting Person * HUDSON DALE M			suer Name and Ticker or Trading ol COAST BANKING CORP OF RIDA [SBCF]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) SEACOAST BANKING CORP. OF FLORIDA, P.O. BOX 9012			e of Earliest Transaction h/Day/Year) 3/2006	_X_ Director _X_ 10% Owner _X_ Officer (give title Other (specify below) Vice Chairman of the Board			
STUART, F	(Street) FL 34995		amendment, Date Original Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person _X_ Form filed by More than One Reporting Person			
(City)	(State)	(Zip) T	able I - Non-Derivative Securities A	quired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)		Code Disposed of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 6. Ownership Form: Direct Indirect Indirect Ownership (Instr. 4) (Instr. 4) (Instr. 4)			
Common Stock	12/13/2006		$G_{\underline{(1)}}$ 5,475 D $\begin{array}{c} \$ \ 0 \\ \underline{(1)} \end{array}$	147,095 D (2)			
Common Stock				1,456,121 D (3)			
Common				810.522 D (4)			

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

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form

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displays a currently valid OMB control number.

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Tit	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration D	ate	Amou	ınt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Unde	rlying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	rities	(Instr. 5)
	Derivative				Securities			(Instr	. 3 and 4)	
	Security				Acquired					
	·				(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
					, ,					
									Amount	
						Date	Expiration		or	
						Exercisable	Date	Title	Number	
						Lacicisuoic	Duic		of	
				Code V	(A) (D)				Shares	

Reporting Owners

Reporting Owner Name / Address	Relationships					
. 9	Director	10% Owner	Officer	Other		
HUDSON DALE M SEACOAST BANKING CORP. OF FLORIDA P.O. BOX 9012 STUART, FL 34995	X	X	Vice Chairman of the Board			
HUDSON MARY T 192 SE HARBOR POINT DRIVE STUART, FL 34996		X				

Signatures

Sharon Mehl as Power of Attorney for Dale M. Hudson & Mary T.
Hudson

12/14/2006

**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) Shares gifted to children and grandchildren
- (2) Held jointly with spouse
- (3) Shares held by Monroe Partners, Ltd., a family partnership
- (4) Shares held by Dale in Company's Profit Sharing Plan as of Sept. 30, 2006

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.

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