

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M17400

Entity Name: MERCANTIL COMMERCEBANK HOLDING CORPORATION**Current Principal Place of Business:**220 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134**Current Mailing Address:**220 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134 US**FEI Number:** 65-0032379**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CTC MANAGEMENT SERVICES, LLC
220 ALHAMBRA CIRCLE
11TH FLOOR
CORAL GABLES, FL 33134 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CD
Name	VOLLMER ACEDO, GUSTAVO J
Address	220 ALHAMBRA CIRCLE
City-State-Zip:	CORAL GABLES FL 33134

Title	DP
Name	WILSON, MILLAR
Address	220 ALHAMBRA CIRCLE
City-State-Zip:	CORAL GABLES FL 33134

Title	D
Name	VILLAMIL, JOSE ANTONIO
Address	220 ALHAMBRA CIRCLE
City-State-Zip:	CORAL GABLES FL 33134

Title	D
Name	VILLAR, GUILLERMO
Address	220 ALHAMBRA CIRCLE
City-State-Zip:	MIAMI FL 33134

Title	SECRETARY
Name	TRUJILLO, IVAN
Address	220 ALHAMBRA CIRCLE
City-State-Zip:	CORAL GABLES FL 33134

I hereby 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 all other like empowered.

SIGNATURE: MILLAR WILSON

DP

03/17/2015

Electronic Signature of Signing Officer/Director Detail_____
Date