## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000041267 **Entity Name: OPTIMUMBANK** 

**Current Principal Place of Business:** 

2477 E. COMMERCIAL BLVD. FORT LAUDERDALE. FL 33308

**Current Mailing Address:** 

2477 E. COMMERCIAL BLVD. FORT LAUDERDALE. FL 33308

FEI Number: 65-1041812 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PROCELLI, THOMAS A. 2477 E. COMMERCIAL BLVD. FORT LAUDERDALE, FL 33308 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: THOMAS A. PROCELLI 04/18/2014

Title

Electronic Signature of Registered Agent

Date

**FILED** Apr 18, 2014

**Secretary of State** 

CC3208357260

Officer/Director Detail:

Title Title DIRECTOR

BOREK, SAM PROCELLI, THOMAS A. Name Name 3545 LAKE AVE., SUITE 200 424 HENDRICKS ISLE Address Address

UNIT 7

DIRECTOR

WILMETTE IL 60091 City-State-Zip:

City-State-Zip: FT. LAUDERDALE FL 33301

Title DIRECTOR

Name GILLMAN, SETH Name KLEIN, JOEL 3360 W. NORTHSHORE AVENUE

Address Address 203 ELM STREET

City-State-Zip: LINCOLNWOOD IL 60712 City-State-Zip: WEST HEMPSTEAD NY 11552

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.