## 2015 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 06/08/2015

City-State-Zip:

WEST HEMPSTEAD NY 11552

Electronic Signature of Registered Agent

Officer/Director Detail:

Address

Title DIRECTOR Title DIRECTOR PROCELLI, THOMAS A. KLEIN, JOEL Name Name

> 203 ELM STREET 424 HENDRICKS ISLE Address UNIT 7

City-State-Zip: FT. LAUDERDALE FL 33301

Title DIRECTOR Title **DIRECTOR** 

Name GINSPARG, NORMAN Name GUBIN, MOISHE

Address 3800 N 39TH AVE 1230 RIDGEDALE RD Address **AVENUE** 

SOUTHBEND IN 46614-2108 City-State-Zip: HOLLYWOOD FL 33021-1806 City-State-Zip:

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: THOMAS PROCELLI

EVP/COO

06/08/2015

**FILED** Jun 08, 2015

**Secretary of State** 

CC4056816722

Date