

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000000278

**Entity Name:** BANK OF CORAL GABLES, LLC**Current Principal Place of Business:**2295 GALIANO STREET  
CORAL GABLES, FL 33134**Current Mailing Address:**2295 GALIANO STREET  
CORAL GABLES, FL 33134**FEI Number:** 20-2411732**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KASHTAN, MICHAEL A  
3300 PONCE DE LEON BLVD.  
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**Authorized Person(s) Detail :**

Title	MGR
Name	EGGLAND, DANIEL C
Address	2295 GALIANO STREET
City-State-Zip:	CORAL GABLES FL 33134

Title	MGR
Name	DUSSEAU, CHARLES
Address	7455 SW 122 STREET
City-State-Zip:	PINECREST FL 33156

Title	MGR
Name	KASHTAN, MICHAEL A
Address	2295 GALIANO STREET
City-State-Zip:	CORAL GABLES FL 33134

Title	MGR
Name	KERDYK, WILLIAM HJR
Address	2631 PONCE DE LEON BLVD.
City-State-Zip:	CORAL GABLES FL 33134

Title	MGR
Name	LESTER, PAUL A
Address	9400 S DADELAND BLVD STE 600
City-State-Zip:	MIAMI FL 33156

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DANIEL EGGLAND

MGR, PRESIDENT

02/20/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date