2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2018
Secretary of State
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Entity Name: NEW YORK COMMUNITY BANK

Current Principal Place of Business:

136-65 ROOSEVELT AVENUE
FLUSHING, NY 11354

Current Mailing Address:

136-65 ROOSEVELT AVENUE
FLUSHING, NY 11354 US

FEI Number: 11-1212640

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	PRESIDENT, DIRECTOR
Name	FICALORA, JOSEPH R.
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354

Title	VP, DIRECTOR
Name	WANN, ROBERT
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354

Title	DIRECTOR
Name	CIAMPA , DOMINICK
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354

Title	DIRECTOR
Name	O'DONOVAN, JAMES J.
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354

Title	SECRETARY
Name	QUINN, R. PATRICK
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354

Title	TREASURER
Name	PINTO, JOHN J.
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354

Title	DIRECTOR
Name	KUPFERBERG, MAX L.
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354

Title	DIRECTOR
Name	TSIMBINOS, JOHN M.
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354

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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: R. PATRICK QUINN SECRETARY 01/29/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	LEVINE, MICHAEL J.
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354

Title	DIRECTOR
Name	ROSENFELD , RONALD A.
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354

Title	DIRECTOR
Name	CLANCY , MAUREEN E.
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354

Title	DIRECTOR
Name	DAHYA, HANIF (WALLY)
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354

Title	DIRECTOR
Name	SAVARESE, LAWRENCE J.
Address	136-65 ROOSEVELT AVENUE
City-State-Zip:	FLUSHING NY 11354