

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000000302

Entity Name: CUSTOMERS BANK, INCORPORATED

Current Principal Place of Business:

1015 PENN AVENUE
SUITE 102
WYOMISSING, PA 19610

FILED
Apr 25, 2019
Secretary of State
6432772867CC

Current Mailing Address:

1015 PENN AVENUE
SUITE 102
WYOMISSING, PA 19610 US

FEI Number: 23-2892229

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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, COO, DIRECTOR
Name EHST, RICHARD A.
Address 1015 PENN AVENUE
 SUITE 102
City-State-Zip: WYOMISSING PA 19610

Title CEO, DIRECTOR
Name SIDHU, JAY S.
Address 1015 PENN AVENUE
 SUITE 102
City-State-Zip: WYOMISSING PA 19610

Title DIRECTOR
Name BURKEY, RICK
Address 1015 PENN AVENUE
 SUITE 102
City-State-Zip: WYOMISSING PA 19610

Title DIRECTOR
Name CHOUDHRIE, BHANU
Address 1015 PENN AVENUE
 SUITE 102
City-State-Zip: WYOMISSING PA 19610

Title DIRECTOR
Name ROTHERMEL, DANIEL
Address 1015 PENN AVENUE
 SUITE 102
City-State-Zip: WYOMISSING PA 19610

Title DIRECTOR
Name SIDHU, SAMVIR
Address 1015 PENN AVENUE
 SUITE 102
City-State-Zip: WYOMISSING PA 19610

Title DIRECTOR
Name WAY, T. LAWRENCE
Address 1015 PENN AVENUE
 SUITE 102
City-State-Zip: WYOMISSING PA 19610

Title DIRECTOR
Name ZUCKERMAN, STEVE
Address 1015 PENN AVENUE
 SUITE 102
City-State-Zip: WYOMISSING PA 19610

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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: CARLA LIEBOLD

**CHIEF FINANCIAL
OFFICER**

04/25/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ALLON, ANDREA
Address 1015 PENN AVENUE
 SUITE 102
City-State-Zip: WYOMISSING PA 19610

Title CFO
Name LIEBOLD, CARLA
Address 1015 PENN AVENUE
 SUITE 102
City-State-Zip: WYOMISSING PA 19610