## **2018 FOREIGN PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F15000005727

**Entity Name: MIDWEST REGIONAL BANK CORPORATION** 

**Current Principal Place of Business:** 

363 FESTUS CENTRE DRIVE FESTUS. MO 63028

**Current Mailing Address:** 

PO BOX 1269

FESTUS. MO 63028 US

FEI Number: 44-0162290 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRANKE, TIMOTHY 3825 HENDERSON BLVD., SUITE 203

TAMPA FL 33629 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: TIMOTHY FRANKE 11/06/2018

Electronic Signature of Registered Agent

Liberial Orgination (Negletona / golf

Officer/Director Detail:

Title C Title [

 Name
 BENDER, MICHAEL F
 Name
 SCHERRER, NELSON C

 Address
 363 FESTUS CENTRE DRIVE
 Address
 363 FESTUS CENTRE DRIVE

City-State-Zip: FESTUS MO 63028 City-State-Zip: FESTUS MO 63028

Title D Title PD

Name SIMMENS, JOSEPH R Name BENDER, TYLER M

Address 363 FESTUS CENTRE DRIVE Address 363 FESTUS CENTRE DRIVE

City-State-Zip: FESTUS MO 63028 City-State-Zip: FESTUS MO 63028

Title EVP Title S

Name TAYLOR, MICHAEL F Name SIRACUSA, SUSAN

Address 363 FESTUS CENTRE DRIVE Address 363 FESTUS CENTRE DRIVE

City-State-Zip: FESTUS MO 63028 City-State-Zip: FESTUS MO 63028

Title D Title D

Name RUBLE, CRAIG R Name LEEMAN, JEFFREY

Address 363 FESTUS CENTRE DRIVE Address 363 FESTUS CENTRE DRIVE

City-State-Zip: FESTUS MO 63028 City-State-Zip: FESTUS MO 63028

Continues on page 2

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: SHANDA GIANLADIS CFO 11/06/2018

Electronic Signature of Signing Officer/Director Detail

Date

FILED Nov 06, 2018

**Secretary of State** 

CR3156505010

Date

## Officer/Director Detail Continued:

Title CFO

Name GIANLADIS, SHANDA N

Address 363 FESTUS CENTRE DRIVE

City-State-Zip: FESTUS MO 63028