2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003324

Entity Name: DESJARDINS FSB HOLDINGS, INC.

Current Principal Place of Business:

1001 EAST HALLANDALE BEACH BOULEVARD HALLANDALE BEACH, FL 33009

Current Mailing Address:

1001 EAST HALLANDALE BEACH BOULEVARD HALLANDALE BEACH, FL 33009 US

FEI Number: 65-0416808

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

Officer/Director Detail :

0111001/2110			
Title	PRESIDENT & CEO, CHAIRMAN	Title	DIRECTOR
Name	LEROUX, MONIQUE F	Name	CHAMBERLAND, SERGES
Address	1 COMPLEXE DESJARDINS 40È ETAGE	Address	1919, RUE DE LA GAILLARDE
City-State-Zip:	MONTREAL H5B 1B2	City-State-Zip:	JONQUIERE G7S 5V9
Title	ASSISTANT TREASURER	Title	DIRECTOR, VP
Name	LUNAK, THOMAS	Name	PARE, DENIS
Address	1001 EAST HALLANDALE BEACH	Address	2140, RUE KING EST SUITE 201
City-State-Zip:	BOULEVARD HALLANDALE BEACH FL 33009	City-State-Zip:	FLEURIMONT J1G 5G6
Title	DIRECTOR, SECRETARY	Title	DIRECTOR
Name	VINET, YVON	Name	GAUVIN, LOUIS-DANIEL
Address	39, RUE JACQUES-CARTIER	Address	1170, RUE PEEL BUREAU 600 - 6E, PX01
City-State-Zip:	SALABERRY-DE-VALLEYFIELD J6T 4R1	City-State-Zip:	MONTREAL H3B 0B1
Title		Title	OFFICER, ASST. SECRETARY
		Name	LACHAINE, ERIC
Name		Address	46 RUE CHARLOTTE
Address	1, COMPLEXE DESJARDINS C.P. 7 30E TOUR SUD, JX01	City-State-Zip:	LONGUEUIL J4H 3K9
City-State-Zip:	MONTREAL H5B 1B2	Continues of	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: THOMAS LUNAK

ASST. TREASURER

03/26/2015 Date

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	RAICHE, ALAIN	Name	ST-PIERRE BAB
Address	477, RUE NOTRE-DAME	Address	1001 EAST HALL
City-State-Zip:	REPENTIGNY QUÉBEC J6A 2T6	City-State-Zip:	BOULEVARD HALLANDALE BE
Title	DIRECTOR	Title	CFO
Name	BARIL, JACQUES	Name	BASTIEN, ROBE
Address	1001 EAST HALLANDALE BEACH BOULEVARD	Address	1001 EAST HALL
City-State-Zip:	HALLANDALE BEACH FL 33009	Address	BOULEVARD
		City-State-Zip:	HALLANDALE BE
Title	ASST. SECRETARY		
Name	BOUCHER, SYLVIE		
Address	1001 EAST HALLANDALE BEACH BOULEVARD		
City-State-Zip:	HALLANDALE BEACH FL 33009		

ritte	DIRECTOR
Name	ST-PIERRE BABIN, SYLVIE
Address	1001 EAST HALLANDALE BEACH BOULEVARD
City-State-Zip:	HALLANDALE BEACH FL 33009
Title	CFO
Title Name	CFO BASTIEN, ROBERT
Name	BASTIEN, ROBERT 1001 EAST HALLANDALE BEACH