

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 018012

1. Entity Name

COCONUT GROVE BANK

Principal Place of Business

2701 SOUTH BAYSHORE DRIVE
MIAMI FL 33133

Mailing Address

2701 SOUTH BAYSHORE DRIVE
MIAMI FL 33133

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCHUETTE, CHARLES A
1 SE 3RD AVE FLOOR 28
MIAMI FL 33131

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HARRISON, A.D. JR. 9440 SW 114TH STREET MIAMI FL 33176	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD UMBERGER, CHARLES D. 1220 SAN REMO AVENUE CORAL GABLES FL 33146	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MURPHY, CAROL P. 7725 SW 144TH STREET MIAMI FL 33158	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V THORPE, DOROTHY L. 9101 SW 93RD AVENUE MIAMI FL 33176-2009	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DUQUE, IGOR 8540 SW 32ND STREET MIAMI FL 33155	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRISON, A.D. 8939 SW 52ND AVENUE MIAMI FL 33156	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANIEL BISCOITTO

4/17/01

Date

305-860-2758

Daytime Phone #

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90323 045 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

0158694

LIST OF OFFICERS OF

COCOONUT GROVE BANK

(Print Name of Financial Institution)

FOR THE YEAR 20__01__

Attachment
D# 018012
#0037856

NAME OF OFFICER	TITLE	MAILING/RESIDENCE ADDRESS (STREET OR BOX #)	CITY/TOWN	STATE	ZIP CODE	SOCIAL SECURITY NUMBER
A.D. Harrison, Jr.	CEO	9440 SW 114 St	Miami	FL	33176	
Charles D. Umberger	Pres & COO	1229 San Remo Ave	Coral Gables	FL	33146	
Daniel C. Eggland	Exec VP	7395 SW 166 St	Miami	FL	33157	
Daniel Biscuito	Sr. VP, Comp, CFO	9620 SW 118 Pl	Miami	FL	33186	
Igor Duque	Sr VP & CIO	8540 SW 32 St	Miami	FL	33155	
Carol P. Murphy	Sr VP	7725 SW 144 St	Miami	FL	33158	
Dorothy Thorpe	Sr VP & Cashier	9101 SW 92 Ave	Miami	FL	33176	
Roger Nimer	Sr VP & Security	9781 SW 122 St	Miami	FL	33176	
John C Mjares	Sr VP-Intl Dept	14457 SW 44 St	Miami	FL	33175	
Henry Enriquez	VP -Brch Mgr	4400 NW 107 Ave #303	Miami	FL	33178	
John F. Mclean	VP & Sr TO	3813 Matheson Ave	Miami	FL	33133	
Richard Conger	VP	2621 Natoma St	Miami	FL	33133	
Debora Riddle	VP	428 N Crescent Dr.	Hollywood	FL	33021	
Jacqueline Albelda	AVP	8111 SW 20 St	Miami	FL	33155	
Edna Barbosa	AVP-Human Res	2325 Swanson Ave	Miami	FL	33133	
Christina Carpenter	AVP	14274 SW 9 Terr	Miami	FL	33184	
Aldo Morales	AVP	9100 SW 137 Ave	Miami	FL	33176	
Maria Paez	AVP	14919 SW 80 St #219	Miami	FL	33193	
Doraido Robles	AC	3153 McDonald St.	Miami	FL	33133	
Cecilia A Black	AC	13441 SW 71 St	Miami	FL	33183	
Constance Kuehn	AC	14250 SW 287 St	Homestead	FL	33033	
Nicole Medina	AC	10815 SW 176 St	Miami	FL	33157	
Hyalanth Stanbury	AC	2568 Trapp Ave	Miami	FL	33133	
Alice Zyne	VP & TO	3470 SW 87 Ct	Miami	FL	33165	
Haydee Orozco	AVP & TO	701 NW 141 Ave #J108	Pembroke Pines	FL	33028	
Keith Buchanan	Asst. TO	20 Island Dr #1216	Miami Beach	FL	33139	
Amarilys Lopez-Biggs	Compl Ofc &	3118 SW 25 Terr	Miami	FL	33133	
Steven G Grubbs	Bank Sec.					

LIST OF DIRECTORS AND OFFICERS OF

COCONUT GROVE BANK

(Type or Print Name of Financial Institution)

COCONUT GROVE BANKSHARES, INC.

(Type or Print Name of Holding Company, if applicable)

attachment
DH 018012
B0037856

STATE COMPTROLLER

Tallahassee, Florida

The following are the directors and officers elected to serve this institution for the year 20 01, including the complete residence and mailing address(es) (both if there is a difference) of each director and officer. On March 14, 2001, the annual meeting was held and directors were elected by the stockholders. In addition, the stockholders authorized the elected Board to appoint 2 (not to exceed two) additional directors during the year, (if provided for in the institution's Articles of Incorporation).

Chairman of the Board (or designee)

NAME OF DIRECTOR	MAILING/RESIDENCE ADDRESS (STREET OR BOX #)	CITY/TOWN	STATE	ZIP CODE	SOCIAL SECURITY NUMBER
A.D. Harrison, Jr. Chrm & CEO	9400 SW 114 St	Miami	Fl	33176	
Jeffrey B Rabin Vice Chrm	8980 SW 117 St	Miami	Fl	33176	
Daniel C. Eggland	7395 SW 166 St	Miami	Fl	33157	
Robert S Forbes	7701 SW 53 Ave	Miami	Fl	33143	
BettyJane Harrison	8939 SW 52 Ave	Miami	Fl	33156	
Frank A Howard, Jr.	6215 SW 82 Ave	Miami	Fl	33143	
Carol P. Murphy	7725 SW 144 St	Miami	Fl	33158	
Raymond Pearlson	6400 SW 129 Terr	Miami	Fl	33156	
Joseph C Shaw	5770 SW 84 Terr	Miami	Fl	33143	
Julio C Sotolongo	911 Messina Ave	Coral Gables	Fl	33134	
Charles D. Umberger	1220 San Remo Ave	Coral Gables	Fl	33146	
J. Hayes Worley, Jr.	17025 SW 79 Ct	Miami	Fl	33157	

PLEASE NOTE: ALL CHANGES OCCURRING IN THE BOARD FOR ANY REASON ARE TO BE REPORTED TO THIS OFFICE AT THE TIME THE CHANGE TAKES PLACE