

**F1 400001932**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies ☒

Certificates of Status ☒



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03/28/14--01023--010 \*\*87.50

RECEIVED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAY - 1 PM 1:17

Special Instructions to Filing Officer:

*OK to process Per-Dime  
w/our Cert.*

*[Signature]*  
5-2-14

Office Use Only

*4/4-20/196*

*[Signature]*  
5-2-14

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** The State Bank of Geneva  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Gary L. Moline  
Name of Person  
The State Bank of Geneva  
Firm/Company  
22 S. Fourth St.  
Address  
Geneva, IL 60134  
City/State and Zip code  
gmoline@sbgeneva.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary L. Moline at ( 630 ) 232-3242  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

The State Bank of  
**Geneva**  
Trust Department

April 21, 2014

Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section  
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: The State Bank of Geneva  
Ref. Number W14000020496

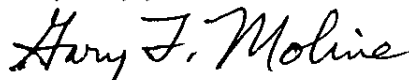
Dear Ms. Gilbert:

Pursuant to your letter of April 1, 2014, a copy of which is enclosed, we have obtained written approval of the word "Bank" from the Florida Office of Financial Regulation. As evidence of the same I also enclose their original approval letter dated April 14, 2014.

Accordingly, and pursuant to your April 1, 2014 letter aforesaid, we are returning our original Application by Foreign Corporation for Authorization to Transact Business in Florida and related attachments. Please process/file same and issue the Certificate of Status and Certified Copy at your earliest convenience.

Thank you.

Very truly yours,



Gary L. Moline  
Vice President/Trust Officer

GLM:krp



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 1, 2014

GARY L. MOLINE  
22 S. FOURTH STREET  
GENEVA, IL 60134

SUBJECT: THE STATE BANK OF GENEVA  
Ref. Number: W14000020496

We have received your document for THE STATE BANK OF GENEVA and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section

Letter Number: 814A00006847



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 1, 2014

GARY L. MOLINE  
22 S. FOURTH STREET  
GENEVA, IL 60134

SUBJECT: THE STATE BANK OF GENEVA  
Ref. Number: W14000020496

We have received your document for THE STATE BANK OF GENEVA and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section

Letter Number: 814A00006847

The State Bank of  
**Geneva**  
Trust Department

March 22, 2014

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

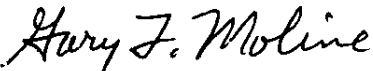
RE: State Bank of Geneva, Geneva, IL.  
Application by Foreign Profit Corporation to do Business in Florida

Dear Sirs:

Enclosed is your form Cover Letter, completed Application, original Certificate of Existence issued by the Illinois Department of Financial and Professional Regulation Division of Banking and our check in the amount of \$87.50 for filing fee, Certificate of Status and certified copy.

Please process same at your earliest convenience. Thank you.

Very truly yours,



Gary L. Moline  
Vice President/Trust Officer

GLM:krp



## FLORIDA OFFICE OF FINANCIAL REGULATION

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DREW J. BREAKSPEAR  
COMMISSIONER

April 14, 2014

Mr. Gary L. Moline  
Vice President/Trust Officer  
The State Bank of Geneva Trust Department  
P.O. Box 108  
Geneva, IL 60134

Re: The State Bank of Geneva, an Illinois Banking Corporation with Trust Powers

Dear Mr. Moline:

Reference is made to your recent letter requesting approval of the above name, which is an Illinois banking corporation with trust powers located in Geneva, Illinois.

As Section 655.922, Florida Statutes, exempts a financial institution, holding company or its subsidiaries from the prohibition of using the word "bank," "banco," "banque," "banker," "banking," "trust company," "savings and loan association," "savings bank," or "credit union," or words of similar import, in any context or in any manner in its corporate name. The Office will not object to the use of the above name being registered to transact business in the state of Florida. However, prior to the institution engaging in banking, trust or insurance business or any other licensed activity in the state of Florida, proper regulatory approvals will be required.

Sincerely,

A handwritten signature in black ink, reading "Robert D. Hayes". The signature is written in a cursive style with a large, stylized "R" and "H".

Robert D. Hayes  
Director

RDH:bk

cc: Brenda Tadlock, Chief, Bureau of Commercial Recordings, Division of Corporations,  
Department of State

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. The State Bank of Geneva  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Illinois 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 7-2-1903 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 22 S. Fourth St., Geneva, IL 60134  
(Principal office address)

22 S. Fourth St., Geneva, IL 60134  
(Current mailing address)

8. Serve as Executor of a decedent's Estate  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

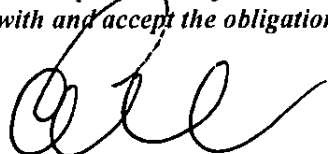
Name: Eric F. Stupel  
Bank of America Building

Office Address: 407 Lincoln Road, Suite C

Miami Beach, Florida 33139  
(City) (Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
\_\_\_\_\_  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAY -1 PM 1:18



12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: A. Gregg Nelson

Address: P.O. Box 454

Geneva, IL 60134

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Lewis L. Deal

Address: P.O. Box 3553

St. Charles, IL 60174

Director: Robert W. Cox

Address: 137 Woodlawn St.

Geneva, IL 60134

**B. OFFICERS**

President: Lewis L. Deal

Address: P.O. Box 3553

St. Charles, IL 60174

Vice President: Mitchell Trier

Address: 4637 Oakwood

Downers Grove, IL 60515

Secretary: Gary L. Moline , Vice President/Trust Officer

Address: 331 N. Park Ave., Aurora, IL 60506

Treasurer: Lewis L. Deal

Address: P.O. Box 3553, St. Charles, IL 60174

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Gary L. Moline  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Gary L. Moline, Vice President/Trust Officer  
(Typed or printed name and capacity of person signing application)

**ADDENDUM**

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO  
TRANSACT BUSINESS IN FLORIDA**

**Additional Directors:**

Stephen M. Cooper  
P.O. Box 388  
Geneva, IL 60134

Peter S. Marberry  
4N890 Black Willow Dr.  
St. Charles, IL 60174

Joy A. Nelson  
P. O. Box 454  
Geneva, IL 60134

Timothy B. Nelson  
1007 James St.  
Geneva, IL 60134

**ADDENDUM**

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO  
TRANSACT BUSINESS IN FLORIDA**

**Additional Officers:**

Robert Kerbs, Asst. V.P.  
673 Hampshire Dr.  
Hampshire, IL 60140

Richard Razum, IT Officer  
421 Chever Ave.  
Geneva, IL 60134

Marsha E. Poquette, Asst. V.P.  
39W204 Wyngate Ct.  
St. Charles, IL 60174

Sheila J. VanBuskirk, Asst. Trust Officer  
P.O. Box 293  
Big Rock, IL 60511



*State of Illinois*  
*Department of Financial and Professional Regulation*  
*Division of Banking*

*Date:* March 6, 2014

*Certificate*

I, **MARC A. EDWARDS**, do hereby certify that, according to the records maintained by the Illinois Department of Financial and Professional Regulation, Division of Banking, **THE STATE BANK OF GENEVA, KANE COUNTY, GENEVA, ILLINOIS**, has held and continues to hold authority to do a general banking business as provided by the Illinois Banking Act and as permitted by its charter.

IN TESTIMONY WHEREOF, I hereby subscribe  
my name.

DEPARTMENT OF FINANCIAL AND  
PROFESSIONAL REGULATION of the  
State of Illinois;  
MANUEL FLORES, ACTING SECRETARY

DIVISION OF BANKING



*Marc A. Edwards*

Marc A. Edwards, Manager  
Bank and Thrift Supervision - Chicago