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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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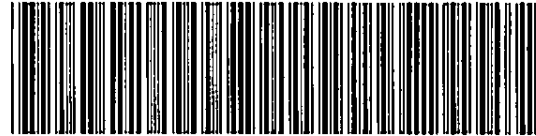
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. FRANKLIN

JAN 25 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CIBM Bank, Inc.

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:

Daniel Rasmussen

Name of Person

CIBM Bank

Firm/Company

2913 W Kirby Avenue

Address

Champaign, IL 61821

City/State and Zip code

Daniel.Rasmussen@cibmbank.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Louis Kern

at (414) 287-9455

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- ☒ \$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

**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. CIBM Bank, Inc.

(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

(State or country under the law of which it is incorporated)

3. 37-0158730

(FEI number, if applicable)

4. December 20, 1920

(Date of incorporation)

5.

(Date of duration, if other than 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. 2913 W Kirby Avenue, Champaign, Illinois 61821

(Principal office street address)

(Current mailing address, if different)

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

Name: Corporate Creations Network Inc.

Office Address: 801 US Highway 1

North Palm Beach

(City)

, Florida 33408

(Zip code)

9. 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.

/s/ Mitchell Garonce

(Registered agent's signature)

10. 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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☒ Chairman Name: Mark A. Elste
☐ Vice Chairman Address: 2913 W Kirby Avenue
☐ Director Champaign, IL 61821
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: J. Brian Chaffin
☐ Vice Chairman Address: 2913 W Kirby Avenue
☐ Director Champaign, IL 61821
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

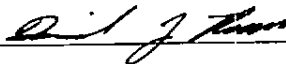
☐ Chairman Name: Gina M. Cocking
☐ Vice Chairman Address: 2913 W Kirby Avenue
☒ Director Champaign, IL 61821
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: JoAnn M. Cotter
☐ Vice Chairman Address: 2913 W Kirby Avenue
☒ Director Champaign, IL 61821
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: Mark D. Henderson
☐ Vice Chairman Address: 2913 W Kirby Avenue
☒ Director Champaign, IL 61821
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: Rhonda Hopps
☐ Vice Chairman Address: 2913 W Kirby Avenue
☒ Director Champaign, IL 61821
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. 
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. Daniel Rasmussen
(Typed or printed name and capacity of person signing application)

Exhibit 1

Names and Addresses of Current Officers and Additional Directors

Officers*

J. Brian Chaffin, Chief Executive Officer & President
Patrick Straka, Chief Financial Officer
Daniel Rasmussen, Chief Administrative Officer & General Counsel
Scott Winkel, Chief Credit Officer
James Mullaney III, Director of Corp Banking
Gary Maughan, Director of Mortgage Banking
Mark Wilmington, Director of Retail Banking
Dawn DeRidder, Director of Gov Guaranteed Lending
Lee Abner, Director of Technology
Michelle Bragstad, Chief Compliance Officer

Additional Directors*

Gary L. Longman
Charles D. Mires
Steven C. Palmitier
Ronald E. Rhoades

*The business address for each of the above officers and directors is:

2913 W Kirby Avenue
Champaign, IL 61821

2913 W Kirby Avenue
Champaign, IL 61821



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

Date: November 21, 2022

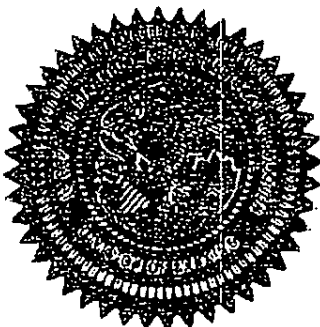
Certificate

I, **CHASSE REHWINKEL**, do hereby certify that, according to the records maintained by the Illinois Department of Financial and Professional Regulation, Division of Banking, **CIBM BANK, CHAMPAIGN COUNTY, CHAMPAIGN, 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;
MARIO TRETO, JR., SECRETARY

DIVISION OF BANKING



Chasse Rehwinkel
Director