

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # F97000006596

1. Entity Name
SUN AMERICAN BANCORP



FILED

06 OCT 17 AM 8:49

CLERK OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1200 N. FEDERAL HWY., #111-A
BOCA RATON, FL 33432

Mailing Address
1200 N. FEDERAL HWY., #111-A
BOCA RATON, FL 33432



09292006 Chg-P CR2E034 (11/05)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
65-0325364

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NICHOLS, ROBERT
3400 CORAL WAY
MIAMI, FL 33145

Name
Nichols, Robert

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

1200 N. Federal Hwy.

Suite 111-A

City
Boca Raton

FL

Zip Code
33432

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Robert Nichols

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

(NOTE: Registered Agent signature required when reinstating)

DATE

000080889160

10/17/06--01010--012 **70.00

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME PERRONE, STEPHEN L
STREET ADDRESS 1915 BRICKELL AVE. #706C
CITY-ST-ZIP MIAMI, FL 33129

TITLE ☐ Change ☒ Addition
NAME Rosinus, Michael
STREET ADDRESS one Northfield Plaza, Suite 300
CITY-ST-ZIP Northfield, IL 60099

TITLE D ☐ Delete
NAME FAMADAS, NELSON
STREET ADDRESS 1332 ASTURIA AVE
CITY-ST-ZIP CORAL GABLES, FL 33134

TITLE ☐ Change ☒ Addition
NAME Valle, Alberto
STREET ADDRESS 7709 W. 15th Ave.
CITY-ST-ZIP Hialeah, FL 33014

TITLE DP ☐ Delete
NAME CASTRO, HUGO
STREET ADDRESS 7411 SW 66 ST L AVENUE
CITY-ST-ZIP MIAMI, FL 33143

TITLE ☒ Change ☐ Addition
NAME CASTRO, Hugo
STREET ADDRESS 7411 SW 66 St L Ave.
CITY-ST-ZIP Miami, FL 33143

TITLE D ☐ Delete
NAME MARINELLO, LEONARD
STREET ADDRESS 600 NE 101 ST
CITY-ST-ZIP MIAMI SHORES, FL 33138

TITLE ☐ Change ☒ Addition
NAME Robert Nichols
STREET ADDRESS 9785 Vinard Ct.
CITY-ST-ZIP Boca Raton, FL 33432

TITLE D ☐ Delete
NAME PARTRIDGE, JAMES F
STREET ADDRESS 3929 GRANADA BLVD
CITY-ST-ZIP CORAL GABLES, FL 33134

TITLE ☒ Change ☐ Addition
NAME Partridge, James
STREET ADDRESS 3929 Granada Blvd.
CITY-ST-ZIP Coral Gables, FL 33134

TITLE DC ☐ Delete
NAME GOLDEN, MICHAEL E
STREET ADDRESS 1200 FEDERAL HIGHWAY, SUITE #111
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE ☒ Change ☐ Addition
NAME Golden, Michael
STREET ADDRESS 1200 Federal Hwy. Suite 111-A
CITY-ST-ZIP Boca Raton, FL 33432

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 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

10/10/06

Date

Daytime Phone #

2010/23