2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H91853

MANUFACTURERS BANK OF FLORIDA

Principal Place of Business	Mailing Address	
1111 N. ARMENIA AVENUE COT OFFICE BOX 4040 LAMPA FL 33677-4040	4144 N. ARMENIA AVENUE POST OFFICE BOX 4040 TAMPA FL 33677-4040	
2 Principal Place of Business	3 Mailing Address	

Jan 19, 2000 8:00 am Secretary of State 01-19-2000 90023 013 ***150.00

:: N. ARMENI	e of Business	Mailing Address	i.P			
OFFICE B	OX 4040	4144 N. ARMENIA AVENUI POST OFFICE BOX 4040 TAMPA FL 33877-4040	•	NUUUUUU		
. Principal Pl	ace of Business	3. Mailing Address				
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Suite, Apt. #, etc. Suite, Apt. #, etc.			DO NOT WRITE IN THIS S	SPACE		
City & State City & State			4. FEI Number 59-2603867	Applied For Not Applicable		
Zip	Country	Zip	Country		\$8.75 Additional Fee Required	
	6. Name and Address of Curre	nt Registered Agent		7. Name and Address of New Registered A	gent	
			Name			
			Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
			City	FL	Zip Code	
. The above	named entity submits this statement	t for the purpose of changing it	ts registered office or regis	stered agent, or both, in the State of Florida.		
	•					
IGNATURE _						
	Signature, typed or printed name of registered ag	ent and title it applicable. (NC	DTE: Registered Agent signature requ	uired when reinstating) DATE		
	ration is eligible to satisfy its Intangi equirement and elects to do so ia on back)	After MAY 1, 2	V!!! FEE IS \$150.00 2000 Fee will be \$550.0 able to Department of S	i iligat fulla Continuation. —	\$5.00 May Be Added to Fees	
1.	OFFICERS AN	ND DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 11	
TLE	D •	☐ Delete	TITLE		☐ Change ☐ Addition	
			NAME			
	AGLIANO, FRANK		TO UNC			
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indicated on this report or supplemental report of the 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

K - Si

MANUFACTURERS BANK - OFFICERS

A0005588

SRVP Chris Stewart 4415 SanRafael Dr. Tampa, Fla. 33629

SRVP Alan Thrall 13511 3rd Ave. NE Bradenton, Fla. 34202

VP Lewis Wright 19039 Portofino Dr. Tampa, Fla. 33647

VP Emma Weisman 3508 W. Palmira Ave. Tampa, Fla. 33629

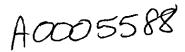
VP Abigail Ryan 6306 Weatherwood Circle Wesley Chapel, Fla. 33544

VP John Hammer 4935 McGritts Blvd. Tampa, Fla. 32210

VP Nancy Gordon 407 Warren Rd Lutz, Fla. 33549

VP Rene Martinez 14167 Feensbury Dr. Tampa, Fla. 33624

VP
Debra Barrionuevo
Vice President
1519 Barr Dr.
Tampa, Fla. 33603



MANUFACTURERS BANK- DIRECTORS

C/D Manuel G. Alvarez, Jr. 4603 Wishart Blvd Tampa, Fla. 33603

P Velma-Jean Kato 6317 112th Ave. Temple Terrace, Fla. 33617

D Alfred T. Rogers 2916 Villa Rosa Park Tampa, Fla. 33611

D Joseph V. Chillura 2904 Villa Rosa Ct. Tampa, Fla. 33611

D Anthony F. Gonzalez 701 N. Franklin St. Tampa, Fla. 33602

D Diana Llaneza 5122 San Jose St. Tampa, Fla. 33629