FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **J83030** 1. Corporation Name

POINTE BANK

Principal Place of Business

ONE WEST FLAMINGO DRIVE PEMBROKE PINES FL 33027

Mailing Address

21845 POWERLINE ROAD **BOCA RATON FL 33027**

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90132 029 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

				11/15/1988		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 21845 Powerline Road 26 21845 1		21845 Power	line koad	65-0031869	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
22 27					Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Boca		28 Boca Raton	Florida Country	Trust Fund Contribution	Added to Fees	
Zip 33433	Country USA	^{Zip} 33433	USA	This corporation owes the current year Interpretation Personal Property Tax.	angipie □Yes □No	
24 33433	9. Name and Address of Current	29	1	10. Name and Address of New Registered		
s. Name and Address of Current Registered Agent						
PALMER, CARL R JR						
21845 POWERLINE ROAD				Street Address (P.O. Box Number is Not Acceptable)		
√ BOC	A RATON FL 33433-7852		83			
	•				7: C-4-	
1			84 City	FL	85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
office or re	egistered agent, or both, in the State of	Florida, Such change was aut onset. Section 607 0505. Florid	horized by the corpora la Statutes.	ation's board of directors. I hereby accept the appoin	ntment as registered	
Linde I						
SIGNATURE	Signature, typed or printed name of rigistered agent :	and title if applicable. (NOTE: R	Registered Agent signature requ		<u> </u>	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	DP	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	PALMER, R. CARL JR		1.2 NAME			
STREET ADDRESS	21845 POWERLINE ROAD		1.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33433		1.4 CITY-ST-ZIP		Change Addition	
THILE	DC	☐ DELETE	2.1 TITLE		Change Addition	
NAME	MASSRY, MORRIS		2.2 NAME		ĺ	
STREET ADDRESS	EXEC. PARK N, STUYVESANT		2 3 STREET ADDRESS			
CITY-ST-ZIP	ALBANY NY	☐ DELETE	2.4 CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE	D PACCIN DODEDTO		3.1 TITLE			
NAME	KASSIN, ROBERTO 21845 POWERLINE ROAD		3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33433	DELETE	3.4. CITY-ST-ZIP		Change Addition	
NAME	MCGINN, TIMOTHY	_ , , , , , , , , , , , , , , , , , , ,	4.2 NAME			
STREET ADDRESS	21845 POWERLINE ROAD		4.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33433		4.4 CITY-ST-ZIP			
TITLE	D	DELETE	5.1 TITLE		Change Addition	
NAME	ELIAS, STEVEN	—	5.2 NAME			
STREET ADDRESS	21845 POWERLINE ROAD		53 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33433		5.4 CITY-ST-ZIP		{	
TITLE	D	DELETE	6.1 TITLE		Change Addition	
NAME	MEAD, D. RICHARD J R		6.2 NAME			
STREET ADDRESS	21845 POWERLINE ROAD		6 3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33433		6.4 CITY-ST-ZIP			
	ertify that the information supplied with	this filing does not qualify for t	he exemption stated in	n Section 119.07(3)(i), Florida Statutes. I further cer	tify that the information	

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am ar officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed of on an attachment with an address, with all other like empowered.

SIGNATURE:

J83030 5324119013229

BLOCK 12 - ADDITIONAL DIRECTOR/OFFICER INFORMATION:

TITLE	D	CHANGE ADDITION
NAME	PARKER D. THOMSON	
STREET ADDRESS	21845 POWERLINE ROAD	
CITY-ST-ZIP	BOCA RATON, FL. 33433	
TITLE	SV	CHANGE ADDITION
NAME	BEVERLY CHAMBERS	
STREET ADDRESS	21845 POWERLINE ROAD	
CITY-ST-ZIP	BOCA RATON, FL. 33433	
TITLE	V	CHANGE ADDITION
NAME	DENNIS REED	
STREET ADDRESS	21845 POWERLINE ROAD	
CITY-ST-ZIP	BOCA RATON, FL. 33433	
TITLE	VT	CHANGE ADDITION
NAME	BRADLEY R MEREDITH	
STREET ADDRESS	21845 POWERLINE ROAD	
CITY-ST-ZIP	BOCA RATON, FL. 33433	