## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT #**

P00000013612

1. Entity Name

REGENT BANCORP, INC.



**FILED** Apr 23, 2003 8:00 am Secretary of State

04-23-2003 90604 001 \*\*\*600.00

					_		
2205 S UNIVERSITY DR 2208		Mailing Address 2205 \$ UNIVERSITY DAVIE FL 33324	5 S UNIVERSITY DR				
2. Principal Place of Business		3. Mailing Address				A HEROTORIA HAY BERTAL BERTAL BERTAL BERTAL BERTAL BERTAL BERTAL HARBERT BATAL ATTENDA ATTENDA ATTENDA ATTENDA	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES	
City & State		City & State			4.	FEI Number 65-1059928 Applied For Not Applicable	
Zip	Country	Zip	Coun	ountry		Certificate of Status Desired   \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent							
SPIRO, CYRIL S				Name			
2205 S UNIVERSITY DR				Street Address (P.O. Box Number is Not Acceptable)			
				- Arth			
DAVIE FL	33324						
				City		FL Zip Code	
	e named entity submits this statement for tions of registered agent.	the purpose of changin	g its registere	ed office or	registered aq	gent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent at	nd title if applicable.	(NOTE: Registered	d Agent signatur	re required when	reinstating) OATE	
FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution: Added to Fees				
10.	OFFICERS AND D	DIRECTORS	11.		Al	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D	□ Delete	TITLE	: T	D	☐ Change 🔀 Addition	
NAME	SPIRO, CYRIL S		NAM			RELLA, THOMASINA	
STREET ADDRESS	2205 S UNIVERSITY DR			et address		UNIVERSITY DR, STE C	
CITY-ST-ZIP	DAVIE FL 33324		CITY	-ST-ZIP		TATION, FL	
TITLE	D	☐ Delete	TITLE		D	☐ Change 🔀 Addition	
NAME	CERRA, JEAN G		NAMI	E		O, JOHN C.	
CTREET ARRECC			етрс	ET ADDDCCC	150 I	E PALMETTO PARK RD	

11300 NE 2ND AVE BOCA RATON, FL CITY-ST-ZIP CITY-ST-ZIP MIAMI SHORES FL ☐ Delete X Addition TITLE ☐ Change TITLE ROSENBAUM, IRVING NAME NAME GERBER, ABRAHAM STREET ADDRESS 3200 S UNIVERSITY DR STREET ADDRESS 3674 DIJON WAY FORT LAUDERDALE, FL CITY-ST-ZIP CITY-ST-ZIP PALM BCH GDNS FL X Addition TITLE ☐ Change ☐ Delete TITLE HILL, OLIN M. 17632 FIELDBROOK CIRCLE N. NAME NAME GRIFFIN, ALFRED D STREET ADDRESS STREET ADDRESS 6211 SW 45TH ST BOCA RATON, FL CITY-ST-ZIP CITY-ST-ZIP DAVIE FL ☐ Change X Addition DCP ☐ Delete TITI F TITI F WEBBER, BARRY NAME NAME SPIRO, CYRIL S STREET ADDRESS 4430 SW 64TH AVENUE STREET ADDRESS 2205 S UNIVERSITY DR CITY-ST-ZIP DAVIE FL 33324 CITY-ST-ZIP DAVIE, FL ☐ Change TITLE ☐ Addition ☐ Delete TITLE TOWN, GEORGE D JR NAME NAME STREET ADDRESS 3250 STIRLING RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report or supplemental peport 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 I laste showard 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 all other like empowered.

SIGNATURE:

DEMURETIL S. Spiro

4/17/03

(954)474-5000