

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157317

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: STERLING BANK

## Current Principal Place of Business:

1189 HYPOLUXO RD  
LANTANA, FL

## New Principal Place of Business:

1189 HYPOLUXO RD  
LANTANA, FL 33462

## Current Mailing Address:

1189 HYPOLUXO RD  
LANTANA, FL

## New Mailing Address:

FEI Number: 59-2520475      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ALBRIGHT, DAVID G  
Address: 1189 HYPOLUXO RD  
City-St-Zip: LANTANA, FL

Title: D ( ) Delete  
Name: BAVELIS, GEORGE A  
Address: 500 S. OCEAN BLVD. #1007  
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete  
Name: COPULOS, STHOMAS DR.  
Address: 1000 NW 9TH CT, STE 106  
City-St-Zip: BOCA RATON, FL 33486

Title: D ( ) Delete  
Name: SIGALOS, GEORGE  
Address: 3839 NW BOCA RATON BLVD., STE #100  
City-St-Zip: BOCA RATON, FL 33431

Title: D ( ) Delete  
Name: VOGEL, THOMAS A  
Address: 305 S. ANDREWS AVE #126  
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D ( ) Delete  
Name: OSTROW, JEFFREY  
Address: 200 SW 1ST AVE., STE #1200  
City-St-Zip: FORT LAUDERDALE, FL 33301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ALBRIGHT, DAVID G  
Address: 1189 HYPOLUXO RD  
City-St-Zip: LANTANA, FL 33462

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: COPULOS, THOMAS DR.  
Address: 1000 NW 9TH CT, STE 106  
City-St-Zip: BOCA RATON, FL 33486

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ASSISTANT CORPORATE SECRETARY  
Electronic Signature of Signing Officer or Director

VP

04/22/2009

Date