

2007 FOR PROFIT CORPORATION ANNUAL REPORT

05-01-2007 90040 033 ***150.00

P06000113979

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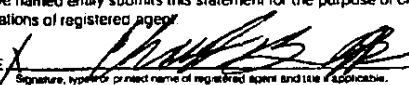
07 MAY 11 AM 11:12

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

40096026



04102007 Chg-P CR2E034 (12/06)

DOCUMENT # P06000113979					
1. Entity Name INSIGNIA BANK					
Principal Place of Business 333 NORTH ORANGE AVENUE SARASOTA, FL 34236			Mailing Address 333 NORTH ORANGE AVENUE SARASOTA, FL 34236		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-5491736	
				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		
CHARLES G. BROWN III 3766 EAGLE HAMMOCK DRIVE SARASOTA, FL 34240			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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:  (NOTE: Registered Agent signature required when reappointing) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		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	TITLE	☐ Change ☐ Addition	
NAME	BROWN, CHARLES G III		NAME		
STREET ADDRESS	3766 EAGLE HAMMOCK DRIVE		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34240		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	CLARKE, TIMOTHY J		NAME		
STREET ADDRESS	1610 HARBOR CAY LANE		STREET ADDRESS		
CITY-ST-ZIP	LONGBOAT KEY, FL 34228		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	DE LIETO, LEON R		NAME		
STREET ADDRESS	4451 CHARLES LANE		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34234		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	GLICK, HARVEY L		NAME		
STREET ADDRESS	6736 LAKESIDE CIRCLE EAST		STREET ADDRESS		
CITY-ST-ZIP	WORTHINGTON, OH 43085		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	LOEFFLER, CHERYL M		NAME		
STREET ADDRESS	415 L'AMBIANCE DRIVE, #203		STREET ADDRESS		
CITY-ST-ZIP	LONGBOAT KEY, FL 34228		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	NORTON, SAM D		NAME		
STREET ADDRESS	4648 STONE RIDGE TRAIL		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 3332		CITY-ST-ZIP		
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:  DATE: 4/30/07 941 366-7100					

ATTACHMENT

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2007 For Profit Corporation
Annual Report
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Item 10 – continued

D
Pender, Michael
209 24th St. West
Bradenton, FL 34209

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Shackelford, Don
5750 Clark State Road
Gahanna, OH 43230