## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000113979

Entity Name: INSIGNIA BANK

FILED Apr 01, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 333 NORTH ORANGE AVENUE SARASOTA, FL 34236 **Current Mailing Address: New Mailing Address:** 333 NORTH ORANGE AVENUE SARASOTA, FL 34236 FEI Number: 20-5491736 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROWN, CHARLES G III 3766 EAGLE HAMMOCK DRIVE SARASOTA, FL 34240 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition BROWN, CHARLES G III Name: Name: 3766 EAGLE HAMMOCK DRIVE Address: Address: City-St-Zip: SARASOTA, FL 34240 City-St-Zip: Title: Title: () Delete () Change () Addition Name: CLARKE, TIMOTHY J Name: 1610 HARBOR CAY LANE Address: Address: LONGBOAT KEY, FL 34228 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition DE LIETO, LEON R Name: Name: 4451 CHARLES LANE Address: Address: City-St-Zip: SARASOTA, FL 34234 City-St-Zip: Title: () Delete Title: () Change () Addition GLICK, HARVEY L Name: Name: Address: 6736 LAKESIDE CIRCLE EAST Address: City-St-Zip: WORTHINGTON, OH 43085 City-St-Zip: Title: Title: ( ) Delete () Change () Addition LOEFFLER, CHERYL M Name: Name: 415 L'AMBIANCE DRIVE, #203 Address: Address: City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: Title: () Delete Title: () Change () Addition NORTON, SAM D Name: Name: 4648 STONE RIDGE TRAIL Address: Address: City-St-Zip: City-St-Zip: SARASOTA, FL 3332

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: CHARLES G. BROWN III CEO 04/01/2009