

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17959

FILED
Apr 15, 2009
Secretary of State

Entity Name: FIRST MIAMI BANCORP, INC.

Current Principal Place of Business:

5750 SUNSET DRIVE
SOUTH MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

5750 SUNSET DRIVE
SOUTH MIAMI, FL 33143

New Mailing Address:

FEI Number: 65-0082986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: MACARTHUR, BRUCE W
Address: 680 N LAKE SHORE DR 19TH FLOOR
City-St-Zip: CHICAGO, IL 606113084 US

Title: SVD () Delete
Name: HUNTER, DONALD F
Address: 8925 HILLOWAY ROAD
City-St-Zip: EDEN PRAIRIE, MN 55347 US

Title: D () Delete
Name: ZIEGLER, JOHN A
Address: 71 SOUTH RIVER ROAD
City-St-Zip: SEWALLS POINT, FL 34996 US

Title: CPD () Delete
Name: WIRTZ, W.R.
Address: 680 N LAKE SHORE DRIVE 19TH FLOOR
City-St-Zip: CHICAGO, IL 606113084 US

Title: TD () Delete
Name: DAMMEIER, DREW A
Address: 2225 CHARTER POINT DRIVE
City-St-Zip: ARLINGTON HEIGHTS, IL 60004 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DREW A. DAMMEIER

TD

04/15/2009

Electronic Signature of Signing Officer or Director

Date