

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P35338

(3)

1. Corporation Name

CITIZENS BANK LIMITED "CORPORATION"

Principal Place of Business

200 S. Biscayne Blvd.
Suite 3550
Miami, FL 33131

Mailing Address

200 S. Biscayne Blvd.
Suite 3550
Miami, FL 33131

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

201 S. Biscayne Blvd.

Suite 1600 (BB)

Miami, FL

33131

U.S.A.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

990

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0273083

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4

300003046563--4
-11/16/99--01105--028
****758.75 ****758.75

8. Name and Address of Current Registered Agent

Corporation Company of Miami
1500 Edward Ball Building
100 Chopin Plaza
Miami, FL 33131

9. Name and Address of New Registered Agent

Name
Corporation Company of Miami
Street Address (P.O. Box Number is Not Acceptable)
201 S. Biscayne Blvd.
Suite, Apt. #, Etc.
Suite 1600 (BB)
City
Miami

State
FL

Zip Code
33131

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent By Katherine A. Harris, Asst. Secretary
REGISTERED AGENT MUST SIGN

Date October 15, 1999

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

Yes ☐ No ☐

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

KE

26-10-99

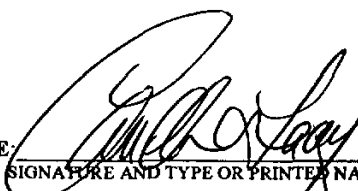
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ADDENDUM TO APPLICATION FOR REINSTATEMENT

7. Names and Street Addresses of Each Officer and/or Director (Florida non-profit corporations must list at least 3 directors)			
Title (s) 1	Names of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3 (Do NOT use Post Office Box Number)	City/State/ZIP 4
CEO/DIR	KENNEDY, WILBUR "DON"	c/o 17 Dominica Drive	Kingston 5, Jamaica W.I.
CFO	NEHMER, JIM	c/o 17 Dominica Drive	Kingston 5, Jamaica W.I.
COO	VALOR, HECTOR	c/o 17 Dominica Drive	Kingston 5, Jamaica W.I.
CIO	CIURLINO, BRENT	c/o 17 Dominica Drive	Kingston 5, Jamaica W.I.
CCO	HOLLINGSWORTH, GRANT	c/o 17 Dominica Drive	Kingston 5, Jamaica W.I.
S	FACEY, CAMILLE	c/o 17 Dominica Drive	Kingston 5, Jamaica W.I.
GM	EDWARDS, LOREN	c/o 17 Dominica Drive	Kingston 5, Jamaica W.I.
AGENT	MURPHY, RICHARD	c/o 201 S. Biscayne Boulevard	Miami, Florida, U.S.A.
DIR	MORRISON, C. DENNIS	48 Duke Street	Kingston, Jamaica W.I.
DIR	CLARKE, MAURICE	49 Temple Mead	Kingston 6, Jamaica W.I.
DIR	McGILL, NEIL	1 Vernon Avenue, Oracabessa	St. Mary, Jamaica W.I.
DIR	MORRISON, DEIKA	28-48 Barbados Avenue	Kingston 5, Jamaica W.I.
DIR	PERRY, LASCELLES	c/o 77 Knutsford Boulevard	Kingston 5, Jamaica W.I.

LEGEND	
CEO	Chief Executive Officer
CFO	Chief Financial Officer
COO	Chief Operations Officer
CIO	Chief Information Officer
CCO	Chief Credit Officer
S	Secretary
GM	General Manager
DIR	Director

SIGNATURE


 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 CAMILLE FACEY
 SECRETARY

26-10-99

DATE