


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90320 017 \*\*\*150.00

<b>DOCUMENT # P94000028453</b>	
1. Entity Name <b>BANKATLANTIC BANCORP, INC.</b>	

Principal Place of Business <b>2100 W. CYPRESS CREEK RD FORT LAUDERDALE, FL 33309</b>	Mailing Address <b>2100 W. CYPRESS CREEK RD FORT LAUDERDALE, FL 33309</b>
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**40003260**



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

04152008 Chg-P CR2E034 (12/06)

4. FEI Number <b>65-0507804</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent <b>NGUYEN, DOQUYEN T 2100 W. CYPRESS CREEK RD FORT LAUDERDALE, FL 33309</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CDP LEVAN, ALAN B 2100 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Levan, Alan B. 2100 West Cypress Creek Road Fort Lauderdale, FL 33309 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DRAPOS, LINDA M 2100 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Levan, Jarett S. 2100 West Cypress Creek Road Fort Lauderdale, FL 33309 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABDO, JOHN E 2100 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIGIULIAN, BRUNO 2100 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COBB, KEITH D 2100 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP Toalson, Valerie C. 2100 West Cypress Creek Road Fort Lauderdale, FL 33309 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLDREN, STEVE M 2100 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:**  **Valerie C. Toalson, Executive Vice President 4/22/08**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 954-940-5000

**2008 ANNUAL REPORT**

**Document # P94000028453**  
**BankAtlantic Bancorp, Inc.**

**ATTACHMENT**

40083260

**OFFICERS AND DIRECTORS continued:**

TITLE: S  
NAME: Drapos, Linda M.  
ADDRESS: 2100 West Cypress Creek Road  
CITY-ST-ZIP: Fort Lauderdale, FL 33309

TITLE: D  
NAME: Cobb, D. Keith  
ADDRESS: 2100 West Cypress Creek Road  
CITY-ST-ZIP: Fort Lauderdale, FL 33309

TITLE: D  
NAME: Ginestra, Mary E.  
ADDRESS: 2100 West Cypress Creek Road  
CITY-ST-ZIP: Fort Lauderdale, FL 33309

TITLE: D  
NAME: Winningham, II, Charlie C.  
ADDRESS: 2100 West Cypress Creek Road  
CITY-ST-ZIP: Fort Lauderdale, FL 33309

TITLE: D  
NAME: Holcombe, Willis  
ADDRESS: 2100 West Cypress Creek Road  
CITY-ST-ZIP: Fort Lauderdale, FL 33309

TITLE: D  
NAME: Lieberman, David A.  
ADDRESS: 2100 West Cypress Creek Road  
CITY-ST-ZIP: Fort Lauderdale, FL 33309