

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000002454

1. Entity Name

FLORIDA CHOICE BANK

Principal Place of Business

Mailing Address

2. Principal Place of Business

18055 U.S. HIGHWAY 441

Suite, Apt. #, etc.

3. Mailing Address

18055 U.S. HIGHWAY 441

Suite, Apt. #, etc.

City & State

MOUNT DORA, FLORIDA

City & State

MOUNT DORA, FLORIDA

Zip

32757

Country

U.S.A.

Zip

32757

Country

U.S.A.

4. FEI Number

59-3526730

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BHAVSAR, CHIRAG J  
FLORIDA CHOICE BANK  
18055 U.S. HIGHWAY 441  
MOUNT DORA, FL 32757

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature of registered agent and title if applicable.

CHIRAG BHAVSAR, EVP, CFO + COO

(NOTE: Registered Agent signature required when reinstating)

4/27/01

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

☐

FILE NOW!

After MAY 1, 2001

Check Payable to Department of State

Fee is \$150.00

Fee will be \$450.00

to Department of State

10. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

|                |                         |                                 |
|----------------|-------------------------|---------------------------------|
| TITLE          | D                       | <input type="checkbox"/> Delete |
| NAME           | BARTCH, DALE E          |                                 |
| STREET ADDRESS | 11226 LANE ROAD         |                                 |
| CITY-ST-ZIP    | TAVARES, FL 32778       |                                 |
| TITLE          | D                       | <input type="checkbox"/> Delete |
| NAME           | BAUMANN, JEFFREY D      |                                 |
| STREET ADDRESS | 1648 BRIDGEMAN ROAD     |                                 |
| CITY-ST-ZIP    | HEATHROW, FL 32746      |                                 |
| TITLE          | D                       | <input type="checkbox"/> Delete |
| NAME           | DESAI, PARESH G         |                                 |
| STREET ADDRESS | 507 NW 9TH AVENUE       |                                 |
| CITY-ST-ZIP    | CRYSTAL RIVER, FL 34428 |                                 |
| TITLE          | D                       | <input type="checkbox"/> Delete |
| NAME           | TOH HOFMEISTER          |                                 |
| STREET ADDRESS | 955 COUNTRY CLUB ROAD   |                                 |
| CITY-ST-ZIP    | EUSTIS, FL 32726        |                                 |
| TITLE          | D                       | <input type="checkbox"/> Delete |
| NAME           | LARDE, MICHAEL C        |                                 |
| STREET ADDRESS | 33940 LEE AVENUE        |                                 |
| CITY-ST-ZIP    | LEESBURG, FL 34788      |                                 |
| TITLE          | D/P/C                   | <input type="checkbox"/> Delete |
| NAME           | LARDE, KENNETH E        |                                 |
| STREET ADDRESS | 212 VINCENT DRIVE       |                                 |
| CITY-ST-ZIP    | MOUNT DORA, FL 32757    |                                 |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|                |                                  |                                                                              |
|----------------|----------------------------------|------------------------------------------------------------------------------|
| TITLE          | D                                | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | CROSON, JAMES A                  |                                                                              |
| STREET ADDRESS | 1322 ELYSIUM BOULEVARD           |                                                                              |
| CITY-ST-ZIP    | MOUNT DORA, FL 32757             |                                                                              |
| TITLE          | V                                | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | BHAVSAR, CHIRAG J                |                                                                              |
| STREET ADDRESS | 1625 SOUTH OSCEOLA AVENUE        |                                                                              |
| CITY-ST-ZIP    | ORLANDO, FL 32806                |                                                                              |
| TITLE          | V                                | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | KUEHN, DONALD                    |                                                                              |
| STREET ADDRESS | 1011 BRISTOL LAKE ROAD, APT #106 |                                                                              |
| CITY-ST-ZIP    | MOUNT DORA, FL 32757             |                                                                              |
| TITLE          | D                                | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | HURLEY, DAVID                    |                                                                              |
| STREET ADDRESS | 1945 OVERLOOK DRIVE              |                                                                              |
| CITY-ST-ZIP    | MOUNT DORA, FL 32757             |                                                                              |
| TITLE          | D                                | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | PORTER, ROBERT                   |                                                                              |
| STREET ADDRESS | 1203 MARSHALL COURT              |                                                                              |
| CITY-ST-ZIP    | EUSTIS, FL 32726                 |                                                                              |
| TITLE          | D                                | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | PRICE, BRAXTON                   |                                                                              |
| STREET ADDRESS | 37124 COUNTY ROAD 452            |                                                                              |
| CITY-ST-ZIP    | GRAND ISLAND, FL 32735           |                                                                              |

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHIRAG BHAVSAR

4/27/01

Date

(352) 735-6161

Daytime Phone #

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

01 MAY 11 PM 2:51

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05/29/01--01010--017

\*\*\*\*900.00 \*\*\*\*900.00

REINSTATEMENT

DO NOT WRITE IN THIS SPACE

00-01

CR2E034 (11/00)

SEE ATTACHED

| <b>Title</b> | <b>Name of Officers and/or Directors</b> | <b>Street Address of Each Officer and/or Director</b> | <b>City/State/Zip</b>  |
|--------------|------------------------------------------|-------------------------------------------------------|------------------------|
| D            | PURDON, ROBERT                           | 37940 ALHAMBRA ROAD                                   | GRAND ISLAND, FL 32735 |
| D            | SANDERS, THOMAS                          | 1801 EDGEWATER DRIVE                                  | MOUNT DORA, FL 32757   |
| D            | SMITH, JOHN                              | 812 JEFFERIS COURT                                    | EUSTIS, FL 32726       |
| D            | STRINGFELLOW, JAYSON                     | 8512 DORAL DRIVE                                      | CLERMONT, FL 34711     |
| D            | STRODE, RANDALL                          | 2231 SOUTH TERRACE BOULEVARD                          | LONGWOOD, FL 32779     |

ALL OF THE ABOVE ARE ADDITIONS