

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000035880

1. Entity Name

PBHC FINANCIAL, INC.

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90065 036 ***150.00

Principal Place of Business

3931- RCA BLVD

STE 3102

PALM BEACH GARDENS, FL 33410

US

Mailing Address

SAME

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0940020

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ANTHONY, JAMES E

3931 RCA BLVD

STE 3102

PALM BEACH GARDENS, FL 33410

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. ☐

(See criteria on back)

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: PRESIDENT ☐ Delete
NAME: ANDERSON, H. L., JR.
STREET ADDRESS: 125 WORTH AVE STE 100
CITY-ST-ZIP: PALM BEACH, FL 33480

TITLE: VICE PRESIDENT ☐ Delete
NAME: ANTHONY, JAMES E
STREET ADDRESS: 3931 RCA BLVD STE 3102
CITY-ST-ZIP: PALM BEACH GARDENS, FL 33410

TITLE: COMPTROLLER ☐ Delete
NAME: MARCHESANI, DEBRA J
STREET ADDRESS: 3931 RCA BLVD STE 3102
CITY-ST-ZIP: PALM BEACH GARDENS, FL 33410

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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NAME:
STREET ADDRESS:
CITY-ST-ZIP:

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

Debra J. Marchesani

May 2, 2000 (561) 776-2405

Date Daytime Phone #

CR2E034 (9/99)