## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 02, 2002 8:00 am Secretary of State

DOCUMENT #p99000035880 1. Entity Name					04-02-2002 90080 014 ***150.00		
Ť	PBHC FINANCIAL, INC.		)				
İ	DO NOT WRITE	IN THIS S	PACE		755537	,	
	Place of Business  A BLVD.	3. Mailing Address 3931 RCA BLVD.					
Suite, Apt. #, etc. STE. 3102		Suite, Apt. #, etc. STE. 3102			DO NOT WRITE IN THIS SPACE		
City & State PALM BEACH GARDENS, FL		City & State PALM BEACH GARDENS, FL			FEI Number 5 <b>–0940</b> 020	Applied For Not Applicable	
33 <b>410</b>	Country <b>USA</b>	33 <b>410</b>	Country <b>USA</b>	5.		\$8.75 Additional Fee Required	
	DO NOT WI		Street Add		MES E Box Number is Not Acceptable) VD., STE. 3102  GARDENS  FL	Zip Code <b>33410</b>	
9. This corpo Tax filing r (See criter	Signature, typed or prefed name of registored agent an oration is eligible to satisfy its Intangible requirement and elects to do so.	January 1 - After Ma Amond Mako Chock Paya	TE: Registered Agent signature May 1 Foo is \$150.6 y 1, Foo is \$550.00 od UBR is \$61.25 iblo to Dopartmont o	00	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
11. TITLE	OFFICERS AND E	DIRECTORS	TITLE.				
NAME STREET ADDRESS	ANTHONY, JAMES E		NAME STREET ADDRESS			:	
CITY- ST- ZIP  TITLE  NAME  STREET ADDRESS  CITY- ST- ZIP  TITLE  NAME  STREET ADDRESS  CITY- ST- ZIP	PALM BEACH GARDENS, P ANDERSON, H. LOY JR 125 WORTH AVE., STE PALM BEACH, FL 3348 C MARCHESANI, DEBRA J 3931 RCA BLVD., STE PALM BEACH GARDENS,	FL 33410 : 100 :00	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		- DO NOT WRI	TE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COPELAND, BERTRAM R. 3931 RCA BLVD., STE 3102 PALM BEACH GARDENS, FL 33410		TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE			
TITLE NAME STREET ADDRESS <sup>{</sup> CITY-ST-ZIP	VP FERGUSON, THOMAS C. 125 WORTH AVE., STE PALM BEACH, FL 3348	100	TITLE NAME STREET ADDRESS GITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP				
indicatéd of the cor	on this report or supplemental report is t	rue and accurate and that wered to execute this rep	my signature shall have	re the same.	119.07(3)(i), Florida Statutes. I further certi legal effect as if made under oath; that I a orida Statutes; and that my name appears	m an officer or director. I	

DEBRA J. MARCHESANI MARCH 19, 2002 (561)776 SIGNATURE: RINTED NAME OF SIGNING OFFICER OR DIRECTOR 2405