

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000056167

FILED
Mar 27, 2007
Secretary of State

Entity Name: TRANSCAPITAL BANK

Current Principal Place of Business:

2100 E HALLANDALE BEACH BLVD.
SUITE 103
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

Current Mailing Address:

2100 E HALLANDALE BEACH BLVD.
SUITE 103
HALLANDALE BEACH, FL 33009

New Mailing Address:

FEI Number: 65-0928143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ZEDECK, LEONARD E
Address: 13790 N.W. 4TH ST., STE. 113
City-St-Zip: SUNRISE, FL 33325

Title: D () Delete
Name: ZEDECK, MURRAY
Address: 2100 E HALLANDALE BEACH BLVD., STE. 103
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: D () Delete
Name: ROTH, SEYMOUR
Address: 2100 E HALLANDALE BEACH BLVD., STE. 103
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: D () Delete
Name: SCHWARTZ, GERALD
Address: 2100 E HALLANDALE BEACH BLVD., STE. 103
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: PD () Delete
Name: HARPER, FLOYD D
Address: 2100 E HALLANDALE BEACH BLVD., STE. 103
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: D () Delete
Name: SCHULMAN, DAVID B
Address: 2100 E HALLANDALE BEACH BLVD., STE. 103
City-St-Zip: HALLANDALE BEACH, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HIMES, WILLIAMS E
Address: 2100 E HALLANDALE BEACH BLVD., STE. 103
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FLOYD D. HARPER

PD

03/27/2007

Electronic Signature of Signing Officer or Director

Date