

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000007176

FILED
Apr 22, 2015
Secretary of State
CC1736567741

Entity Name: STONEGATE BANK

Current Principal Place of Business:

400 NORTH FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

Current Mailing Address:

P.O. BOX 10069
POMPANO BEACH, FL 33061 US

FEI Number: 20-4486142

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OLIVER, GERALD W
400 NORTH FEDERAL HIGHWAY
POMPANO BEACH, FL 33062 US

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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title D
Name HOLDING, JEFFREY
Address 400 NORTH FEDERAL HIGHWAY
City-State-Zip: POMPANO BEACH FL 33062

Title D
Name NUDELMAN, JEFF
Address 400 NORTH FEDERAL HIGHWAY
City-State-Zip: POMPANO BEACH FL 33062

Title D, CEO, PRESIDENT
Name SELESKI, DAVID
Address 400 NORTH FEDERAL HIGHWAY
City-State-Zip: POMPANO BEACH FL 33062

Title D, CHAIRMAN
Name TOMLINSON, JOHN L
Address 400 NORTH FEDERAL HIGHWAY
City-State-Zip: POMPANO BEACH FL 33062

Title D
Name STRAUB, GLENN
Address 400 NORTH FEDERAL HIGHWAY
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR
Name LABODA, GERALD DR.
Address 400 NORTH FEDERAL HIGHWAY
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR
Name SEIDMAN, LAWRENCE
Address 400 NORTH FEDERAL HIGHWAY
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR
Name SOUAID, ROBERT
Address 400 NORTH FEDERAL HIGHWAY
City-State-Zip: POMPANO BEACH FL 33062

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I hereby 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 all other like empowered.

SIGNATURE: DAVID SELESKI

PRESIDENT

04/22/2015

Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BALDWIN, JON
Address 400 NORTH FEDERAL HIGHWAY
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR
Name GALLO, WILLIAM
Address 400 NORTH FEDERAL HIGHWAY
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR
Name KEIR, BRUCE
Address 400 NORTH FEDERAL HIGHWAY
City-State-Zip: POMPANO BEACH FL 33062