2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J83024

Entity Name: PILOT BANK

Current Principal Place of Business:

12471 WEST LINEBAUGH AVENUE

TAMPA, FL 33626

Current Mailing Address:

12471 WEST LINEBAUGH AVENUE TAMPA. FL 33626 US

FEI Number: 59-2689717 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PUFFER , JOHN W III 3013 VILLA ROSA PARK TAMPA, FL 33611 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: JOHN W PUFFER III 03/17/2015

Electronic Signature of Registered Agent

Date

FILED Mar 17, 2015

Secretary of State

CC4649454145

Officer/Director Detail:

Title D Title P, D

Name DEWEESE, WILLIAM O Name HELLWEGE, ROY

Address 4033 PRIORY CIRCLE Address 12471 WEST LINEBAUGH AVENUE

City-State-Zip: TAMPA FL City-State-Zip: TAMPA FL 33626

Title C, D Title D

NamePUFFER, JOHN W IIINameROSS, ANN MCKEELAddress3013 VILLA ROSA PARKAddress606 S RIVERHILLS DRCity-State-Zip:TAMPA FL 33611City-State-Zip:TAMPA FL 33617

Title D Title CFO

Name TOMASINO, PAUL Name THOMPSON, AARON

Address 12301 N 52ND ST Address 12471 WEST LINEBAUGH AVENUE

City-State-Zip: TAMPA FL 33617 City-State-Zip: TAMPA FL 33626

Title DIRECTOR Title DIRECTOR

Name FERRAS , IGNACIO III Name SMITH, TIMOTHY M

Address P O BOX 173428 Address 4300 N. OCEAN BLVD

City-State-Zip: TAMPA FL 33672 City-State-Zip: FT. LAUDERDALE FL 33308

Continues on page 2

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: AARON THOMPSON CFO 03/17/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name SOUTHWORTH, GEORGE L Name LEWIS, ROBERT E

Address P O BOX 16966 Address 3321 ELIZABETH COURT

City-State-Zip: TEMPLE TERRACE FL 33617 City-State-Zip: TAMPA FL 33629