2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000069969

Entity Name: CARILLON FUND DISTRIBUTORS, INC.

Current Principal Place of Business:

880 CARILLON PARKWAY ST. PETERSBURG. FL 33716

Current Mailing Address:

880 CARILLON PARKWAY ST. PETERSBURG. FL 33716 US

FEI Number: 20-2867072 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: SARAH REVELLE, ASSISTANT SECRETARY

04/18/2021

FILED Apr 18, 2021

Secretary of State

3349377621CC

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title SECRETARY Title DIRECTOR

Name MORRISON, ROBERT Name GILBERT, STEVEN

Address 880 CARILLON PARKWAY Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716

Title SVP, FUND ADMINISTRATION Title DIRECTOR

Name WALZER, SUSAN L. Name WALZER, SUSAN L.

Address 880 CARILLON PARKWAY Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716

TitleREGULATORY CONTACTTitleAUTHORIZED ASSOCIATENameGILBERT, STEVENNameABBOTT, J. COOPER

Address 880 CARILLON PARKWAY Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716

Title ENTITY MANAGER Title CHIEF INFORMATION SECURITY

OFFICER

Name LU, CHIH-PIN Name ZOLPER, ANDREW ("ANDY") C.
Address 880 CARILLON PARKWAY

Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716

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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: ROBERT MORRISON SECRETARY 04/18/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title AML AND OFAC SANCTIONS OFFICER

Name SCHARMER, MICHAEL
Address 880 CARILLON PARKWAY
City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR

Name OLLIA, MARSHALL F.
Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716

Title CONTROLLER, ASSISTANT TREASURER

Name THIEME, DEREK

Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716

Title VP, CHIEF COMPLIANCE OFFICER

Name SOUSA, DAMIAN

Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716

Title SVP, CFO, TREASURER AND FINOP

Name OLLIA, MARSHALL F.

Address 880 CARILLON PARKWAY
City-State-Zip: ST. PETERSBURG FL 33716

Title ASSISTANT TREASURER

Name ALLEN, BRADLEY W.

Address 880 CARILLON PARKWAY
City-State-Zip: ST. PETERSBURG FL 33716

Title CEO, PRESIDENT, PRINCIPAL

OPERATIONS OFFICER, PRIVACY OFFICER, COMPLIANCE OFFICER

Name GILBERT, STEVEN

Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716