2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000144296

Entity Name: FLAGSHIP BANK

Current Principal Place of Business:

29750 U.S. HWY 19 N.

SUITE 100

CLEARWATER, FL 33761

Current Mailing Address:

29750 U.S. HWY 19 N.

SUITE 100

CLEARWATER, FL 33761

FEI Number: 20-2472079 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PEARLMAN, RICHARD 2457 CARE DRIVE 203

TALLAHASSEE, FL 32308 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: RICHARD PEARLMAN 01/29/2025

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

Name BRANDON, DAVID L Name HOCKMAN, RONALD S

Address 29750 U.S. HWY 19 N. Address 29750 U.S. HWY 19 N.

SUITE 100 SUITE 100

City-State-Zip: CLEARWATER FL 33761 City-State-Zip: CLEARWATER FL 33761

TitleDIRECTORTitleDIRECTORNameKLEIN, MARK SNameMARKS, O. KEN

Address 29750 U.S. HWY 19 N. Address 29750 U.S. HWY 19 N.

SUITE 100 SUITE 100

City-State-Zip: CLEARWATER FL 33761 City-State-Zip: CLEARWATER FL 33761

Title DIRECTOR Title DIRECTOR

Name MCGIVNEY, ROBERT B Name OLIVERI, JOSEPH L

Address 29750 U.S. HWY 19 N. Address 29750 U.S. HWY 19 N.

SUITE 100 SUITE 100

City-State-Zip: CLEARWATER FL 33761 City-State-Zip: CLEARWATER FL 33761

Title DIRECTOR Title CHAIRMAN

Name SEMBLER, BRENT W Name WIKLE, PAUL J

Address 29750 U.S. HWY 19 N. Address 29750 U.S. HWY 19 N.

SUITE 100 SUITE 100

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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: TAMMY BRIGMOND CORPORATE 01/29/2025 SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 29, 2025

Secretary of State

6955289011CC

Officer/Director Detail Continued:

Title CEO

Name KEY, DAVID B

Address 29750 U.S. HWY 19 N.

SUITE 100

City-State-Zip: CLEARWATER FL 33761

Title DIRECTOR

Name SPROWLS, CHRISTOPHER J

Address 29750 U.S. HWY 19 N.

SUITE 100

City-State-Zip: CLEARWATER FL 33761

Title EVP, CHIEF BANKING OFFICER

Name PATEL, NICKESH

Address 29750 U.S. HWY 19 N.

SUITE 100

City-State-Zip: CLEARWATER FL 33761

Title EVP, CHIEF RISK OFFICER

Name MOSS, THERESA M

Address 29750 U.S. HWY 19 N.

SUITE 100

City-State-Zip: CLEARWATER FL 33761

Title CORPORATE SECRETARY

Name BRIGMOND, TAMMY D

Address 29750 U.S. HWY 19 N.

SUITE 100

City-State-Zip: CLEARWATER FL 33761

Title EVP, CFO

Name BAILEY, KENNETH E

Address 29750 U.S. HWY 19 N.

SUITE 100

City-State-Zip: CLEARWATER FL 33761

Title EVP, CHIEF ADMINISTRATIVE

OFFICER

Name PERDEK, JEAN A

Address 29750 U.S. HWY 19 N.

SUITE 100

City-State-Zip: CLEARWATER FL 33761

Title PRESIDENT

Name DITINNO, ANTHONY M

Address 29750 U.S. HWY 19 N.

SUITE 100

City-State-Zip: CLEARWATER FL 33761

Title EVP, CHIEF INFORMATION OFFICER

Name RHODES, DAVID B

Address 29750 U.S. HWY 19 N.

SUITE 100

City-State-Zip: CLEARWATER FL 33761