

2019 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000060636

Entity Name: BANKFLORIDA**Current Principal Place of Business:**450 UNIVERSITY BLVD.
JUPITER, FL 33458**Current Mailing Address:**450 UNIVERSITY BLVD.
JUPITER, FL 33458 US**FEI Number:** 20-8982689**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PAGE, KENNARD
450 UNIVERSITY BLVD.
JUPITER, FL 33458 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:** KENNARD PAGE

12/05/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, CHAIRMAN
Name WORLEY, DAVID L
Address 450 UNIVERSITY BLVD.
City-State-Zip: JUPITER FL 33458

Title DIRECTOR
Name STEWART, EARL D JR
Address 450 UNIVERSITY BLVD.
City-State-Zip: JUPITER FL 33458

Title DIRECTOR, VC
Name SACERDOTE, BRUCE
Address 450 UNIVERSITY BLVD.
City-State-Zip: JUPITER FL 33458

Title DIRECTOR
Name DIAMOND, JONATHAN
Address 450 UNIVERSITY BLVD.
City-State-Zip: JUPITER FL 33458

Title DIRECTOR
Name PASCUTTI, MICHAEL J
Address 450 UNIVERSITY BLVD.
City-State-Zip: JUPITER FL 33458

Title DIRECTOR, CEO
Name PAGE, KENNARD
Address 450 UNIVERSITY BLVD.
City-State-Zip: JUPITER FL 33458

Title CORPORATE SECRETARY
Name WORLEY, MARGARET
Address 450 UNIVERSITY BLVD.
City-State-Zip: JUPITER FL 33458

Title SENIOR LENDING OFFICER
Name HICKS, CHARLES
Address 450 UNIVERSITY BLVD.
City-State-Zip: JUPITER FL 33458

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: KENNARD PAGE

CEO

12/05/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	CONTROLLER
Name	BORUS, MICHELLE L.
Address	450 UNIVERSITY BLVD.
City-State-Zip:	JUPITER FL 33458