

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000029322

**FILED**  
**Feb 09, 2017**  
**Secretary of State**  
**CC8575924170**

**Entity Name:** GATEWAY BANK OF SOUTHWEST FLORIDA

**Current Principal Place of Business:**

1100 S. TAMIAMI TRAIL  
SUITE 100  
SARASOTA, FL 34236

**Current Mailing Address:**

P.O. BOX 1029  
SARASOTA, FL 34230-1029

**FEI Number:** 20-5769880

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HICKS, RICHARD A EVP/CFO  
1100 S. TAMIAMI TRAIL  
SUITE 201  
SARASOTA, FL 34236 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 A. HICKS

02/09/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DC  
Name BARTLETT, CHARLES JCHMN  
Address 1100 S. TAMIAMI TRAIL  
SUITE 100  
City-State-Zip: SARASOTA FL 34236

Title D  
Name BOCKHOLD, GARY K  
Address 1100 S. TAMIAMI TRAIL  
SUITE 100  
City-State-Zip: SARASOTA FL 34236

Title CFOS  
Name HICKS, RICHARD A  
Address 1100 S. TAMIAMI TRAIL  
SUITE 201  
City-State-Zip: SARASOTA FL 34236

Title D  
Name GRAIN, DAVID J  
Address 1100 S. TAMIAMI TRAIL  
SUITE 100  
City-State-Zip: SARASOTA FL 34236

Title D  
Name MAHOLIAS, DAVID K  
Address 1950 W. INTERNATIONAL SPEEDWAY  
BLVD  
City-State-Zip: DAYTONA BEACH FL 32114

Title DPCEO  
Name MERRIMAN, SHAUN P  
Address 1100 S. TAMIAMI TRAIL  
SUITE 100  
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR  
Name MOULTON, KATHERINE K  
Address 1100 S. TAMIAMI TRAIL  
SUITE 100  
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR  
Name RUBEN, WAYNE M  
Address 1100 S. TAMIAMI TRAIL  
SUITE 100  
City-State-Zip: SARASOTA FL 34236

**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:** RICHARD A. HICKS

EVP/CFO/COO

02/09/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VC, DIRECTOR  
Name MESHAD, GAVIN W  
Address 1100 S. TAMIAMI TRAIL  
SUITE 100  
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR  
Name SESSIONS, DAVID E.  
Address 1100 S. TAMIAMI TRAIL  
SUITE 100  
City-State-Zip: SARASOTA FL 34236