

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000056561

**FILED**  
**Feb 01, 2018**  
**Secretary of State**  
**CC6942633269**

**Entity Name:** FIRST STATE BANK OF THE FLORIDA KEYS HOLDING COMPANY

**Current Principal Place of Business:**

1201 SIMONTON ST  
KEY WEST, FL 33040

**Current Mailing Address:**

1201 SIMONTON ST  
KEY WEST, FL 33040 US

**FEI Number: 27-0480216**

**Certificate of Status Desired: No**

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

GOODRICH, DORIA  
1201 SIMONTON ST  
KEY WEST, FL 33040 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name MOORE, RANDY  
Address 1201 SIMONTON STREET  
City-State-Zip: KEY WEST FL 33040

Title D  
Name BERVALDI, FRANK VDR  
Address 1220 SOUTH ST  
City-State-Zip: KEY WEST FL 33040

Title PD  
Name SHARP, KAREN M  
Address 1201 SIMONTON ST  
City-State-Zip: KEY WEST FL 33040

Title D  
Name SPOTTSWOOD, JOHN M JR.  
Address 1201 SIMONTON STREET  
City-State-Zip: KEY WEST FL 33040

Title D  
Name SPOTTSWOOD, ROBERT A  
Address 1201 SIMONTON STREET  
City-State-Zip: KEY WEST FL 33040

Title D  
Name KEMP, WILLIAM O  
Address 121 US HWY 1 STE 103  
City-State-Zip: KEY WEST FL 33040

Title SECRETARY  
Name GOODRICH, DORIA  
Address 1201 SIMONTON ST  
City-State-Zip: KEY WEST FL 33040

*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: DORIA GOODRICH**

**EVP, CORPORATE  
SECRETARY**

**02/01/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date