

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000064536

Entity Name: BARWICK BANCORP, INC.**Current Principal Place of Business:**1200 PLANTATION ISLAND DRIVE, SUITE 110
ST. AUGUSTINE, FL 32080**Current Mailing Address:**1200 PLANTATION ISLAND DRIVE, SUITE 110
ST. AUGUSTINE, FL 32080 US**FEI Number:** 92-1078051**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BANGE, JAMES J JR
1200 PLANTATION ISLAND DRIVE, SUITE 110
ST. AUGUSTINE, FL 32080 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	BANGE, JAMES J JR
Address	1200 PLANTATION ISLAND DRIVE, SUITE 110
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	D
Name	KRESGE, KENNETH R
Address	1200 PLANTATION ISLAND DRIVE, SUITE 110
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	D
Name	SLOAN, PRESTON B
Address	1200 PLANTATION ISLAND DRIVE, SUITE 110
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	D
Name	BOWLING, CHAD
Address	1200 PLANTATION ISLAND DRIVE, SUITE 110
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	D
Name	MCLEOD, ROBERT
Address	1200 PLANTATION ISLAND DRIVE, SUITE 110
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	SECRETARY
Name	CHASTAIN, MARK
Address	1200 PLANTATION ISLAND DRIVE, SUITE 110
City-State-Zip:	ST. AUGUSTINE FL 32080

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: CHAD BOWLING**PRESIDENT****02/22/2024**

Electronic Signature of Signing Officer/Director Detail

Date