#### 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000053890

**Entity Name: ARGENT INSTITUTIONAL TRUST COMPANY** 

FILED
Apr 08, 2024
Secretary of State
8168861068CC

## **Current Principal Place of Business:**

1715 N. WESTSHORE BOULEVARD SUITE 750 TAMPA, FL 33607

# **Current Mailing Address:**

1715 N. WESTSHORE BOULEVARD SUITE 750 TAMPA, FL 33607 US

FEI Number: 56-2075834 Certificate of Status Desired: Yes

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

RHEIN, MARK 1715 N. WESTSHORE BOULEVARD SUITE 750 TAMPA, FL 33607 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: MARK RHEIN 04/08/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CHAIRMAN OF THE BOARD Title CHIEF EXECUTIVE OFFICER

Name GUTHRIE, ANTHONY Name EASON, STEVEN

Address 5901 PEACHTREE DUNWOODY ROAD Address 5901 PEACHTREE DUNWOODY ROAD

SUITE C495 SUITE C495

City-State-Zip: ATLANTA GA 30328 City-State-Zip: ATLANTA GA 30328

Title CHIEF FINANCIAL OFFICER Title PRESIDENT SALEM TRUST COMPANY

Name GEORGE, DEBORAH Name RHEIN, MARK

Address 5901 PEACHTREE DUNWOODY ROAD Address 1715 N. WESTSHORE BOULEVARD

SUITE C495 SUITE 750

City-State-Zip: ATLANTA GA 30328 City-State-Zip: TAMPA FL 33607

Title ASSISTANT SECRETARY Title CHIEF RISK OFFICER

Name ROOKER, GIL Name CONTINO, DINAH

Address 5901 PEACHTREE DUNWOODY ROAD Address 1100 ABERNATHY ROAD

SUITE C495 SUITE 480

City-State-Zip: ATLANTA GA 30328 City-State-Zip: ATLANTA GA 30328

Title CHIEF LEGAL OFFICER Title PRESIDENT ARGENT INSTITUTIONAL

Name FINLEY, ROBERT TRUST COMPANY
Name GILLESPIE, DENNIS

Address 5901 PEACHTREE DUNWOODY ROAD

SUITE C495

Address

5901 PEACHTREE DUNWOODY ROAD
SUITE C495

City-State-Zip: ATLANTA GA 30328

City-State-Zip: ATLANTA GA 30328

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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: GIL ROOKER ASSISTANT SECRETARY 04/08/2024

Electronic Signature of Signing Officer/Director Detail

Date

### Officer/Director Detail Continued:

CHIEF OPERATING OFFICER Title Title **DIRECTOR** 

TEEVAN, CHRISTOPHER Name Name MAXWELL, JAMES

Address 5901 PEACHTREE DUNWOODY ROAD Address 5901 PEACHTREE DUNWOODY ROAD SUITE C495

SUITE C495

City-State-Zip: ATLANTA GA 30328 City-State-Zip: ATLANTA GA 30328

Title DIRECTOR Title **DIRECTOR** 

Name CURCIO, RICHARD Name WADE, CHARLES D.

Address 5901 PEACHTREE DUNWOODY ROAD Address 5901 PEACHTREE DUNWOODY ROAD

SUITE C495 SUITE C495

ATLANTA GA 30328 ATLANTA GA 30328 City-State-Zip: City-State-Zip:

Title DIRECTOR Title **DIRECTOR** 

WAGNER, KEITH C. WELGAT, MICHAEL Name Name

5901 PEACHTREE DUNWOODY ROAD Address 5901 PEACHTREE DUNWOODY ROAD Address

SUITE C495 SUITE C495

ATLANTA GA 30328 ATLANTA GA 30328 City-State-Zip: City-State-Zip:

DIRECTOR Title **DIRECTOR** Title

Name BOUDA, BRIAN P Name EASON, STEVEN B

Address 13209 TREVISO DRIVE Address 3441 CEDAR HAMMOCK VIEW COURT

City-State-Zip:

FORT MYERS FL 33905

City-State-Zip: **BRADENTON FL 34211** 

**DIRECTOR** 

Title Title **DIRECTOR** 

Name KILPATRICK, TROY L Name MCDONALD, D. KYLE Address 171 KNOXVIEW LANE 500 E. REYNOLDS DRIVE Address MOORESVILLE NC 28117 City-State-Zip:

City-State-Zip: RUSTON LA 71270

Title DIRECTOR Title DIRECTOR

Name RAHBARI, KAIVAN Name MCROBERTS, TERRY L 7730 FLEMINGWOOD COURT Address 4 CALLE DE PRINCESA Address

SANFORD FL 32771 City-State-Zip: COTO DE CAZA CA 92679 City-State-Zip: