## **2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000004913

Entity Name: BANK OZK

Entity Name. BANK OZK

**Current Principal Place of Business:** 

17901 CHENAL PARKWAY LITTLE ROCK, AR 72223

**Current Mailing Address:** 

P.O. BOX 8811

LITTLE ROCK. AR 72231 US

FEI Number: 71-0130170 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

FILED Apr 24, 2020

**Secretary of State** 

5934211182CC

Officer/Director Detail:

Title CHAIRMAN, CEO Title CFO

NameGLEASON, GEORGE GNameMCKINNEY, GREGAddressP.O. BOX 8811AddressP.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231 City-State-Zip: LITTLE ROCK AR 72231

Title SECRETARY Title DIRECTOR

Name BROWN, HELEN Name KOEFOED, WILLIAM

Address P.O. BOX 8811 Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231 City-State-Zip: LITTLE ROCK AR 72231

TitleDIRECTORTitleDIRECTORNameBROWN, NICHOLASNameEAST, ROBERTAddressP.O. BOX 8811AddressP.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231 City-State-Zip: LITTLE ROCK AR 72231

TitleDIRECTORTitleDIRECTORNameFREEDBERG, CATHERINE B. PHDNameKENNY, PETERAddressP.O. BOX 8811AddressP.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231 City-State-Zip: LITTLE ROCK AR 72231

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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: JOSEPH I. STRACK

**EVP/TAX DIRECTOR** 

04/24/2020

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name PROOST, ROBERT

Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title DIRECTOR

Name WHIPPLE, ROSS Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title OFFICER

Name EDWARDS, MELVIN

Address 17901 CHENAL PARKWAY

City-State-Zip: LITTLE ROCK AR 72223

Title DIRECTOR

Name CHOLMONDELEY, PAULA

Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title OFFICER

Name CUNNINGHAM, JEFF

Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title OFFICER

Name WATKINS, MATTHEW

Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title DIRECTOR

Name GEARHART, JEFFREY

Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title DIRECTOR

Name SADOFF, STEVEN Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title CHIEF ADMINISTRATIVE OFFICER

Name HICKS, TIM
Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title DIRECTOR

Name REYNOLDS, JOHN Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title OFFICER, EVP/TAX DIRECTOR

Name STRACK, JOSEPH I.

Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title OFFICER
Name DIGSBY, ERIC

Address 17901 CHENAL PARKWAY

City-State-Zip: LITTLE ROCK AR 72223

Title DIRECTOR

Name MULLEN, JACK

Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title OFFICER

Name STAMSCHROR, SCOTT

Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title DIRECTOR

Name FRANKLIN, KATHLEEN

Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title DIRECTOR

Name ORNDORFF, CHRISTOPHER

Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231

Title DIRECTOR

Name COLE, BEVERLY

Address P.O. BOX 8811

City-State-Zip: LITTLE ROCK AR 72231