2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2017
Secretary of State
CC3394770005

DOCUMENT# F04000004913

Entity Name: BANK OF THE OZARKS

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

Officer/Director Detail :

Title	CHAIRMAN, CEO
Name	GLEASON, GEORGE G
Address	P.O. BOX 8811
City-State-Zip:	LITTLE ROCK AR 72231

Title	COO
Name	VANCE, TYLER
Address	P.O. BOX 8811
City-State-Zip:	LITTLE ROCK AR 72231

Title	DIRECTOR, CHIEF LENDING OFFICER
Name	THOMAS, DAN
Address	P.O. BOX 8811
City-State-Zip:	LITTLE ROCK AR 72231

Title	DIRECTOR
Name	KOEFOED, WILLIAM
Address	P.O. BOX 8811
City-State-Zip:	LITTLE ROCK AR 72231

Title	DIRECTOR
Name	GLEASON, LINDA D
Address	P.O. BOX 8811
City-State-Zip:	LITTLE ROCK AR 72231

Title	CFO
Name	MCKINNEY, GREG
Address	P.O. BOX 8811
City-State-Zip:	LITTLE ROCK AR 72231

Title	SECRETARY
Name	BROWN, HELEN
Address	P.O. BOX 8811
City-State-Zip:	LITTLE ROCK AR 72231

Title	DIRECTOR
Name	BROWN, NICHOLAS
Address	P.O. BOX 8811
City-State-Zip:	LITTLE ROCK AR 72231

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: JOSEPH I. STRACK, BANK OF THE OZARKS EVP/TAX DIRECTOR 03/15/2017

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CISNE, RICHARD
Address	P.O. BOX 8811
City-State-Zip:	LITTLE ROCK AR 72231

Title	DIRECTOR
Name	FREEDBERG, CATHERINE B. PHD
Address	P.O. BOX 8811
City-State-Zip:	LITTLE ROCK AR 72231

Title	DIRECTOR
Name	MARIANI, HENRY
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	DIRECTOR
Name	EAST, ROBERT
Address	P.O. BOX 8811
City-State-Zip:	LITTLE ROCK AR 72231

Title	DIRECTOR
Name	KENNY, PETER
Address	P.O. BOX 8811
City-State-Zip:	LITTLE ROCK AR 72231

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