

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006188

Entity Name: FIRST BANK OF SOUTHWEST FLORIDA**Current Principal Place of Business:**11901 OLIVE BLVD.
CREVE COEUR, MO 63141**Current Mailing Address:**C/O TAX DEPARTMENT, MC019
600 JAMES S. MCDONNELL BLVD.
HAZELWOOD, MO 63042-2302**FEI Number:** 43-0231490**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
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	PRESIDENT, DIRECTOR
Name	TIMOTHY, LATHE J
Address	135 N. MERAMEC
City-State-Zip:	CLAYTON MO 63105

Title	SECRETARY, DIRECTOR
Name	VANSICKLE, LISA K
Address	135 N. MERAMEC
City-State-Zip:	CLAYTON MO 63105

Title	VP
Name	CARSON, ANNETTE R
Address	600 JAMES S. MCDONNELL BLVD.
City-State-Zip:	HAZELWOOD MO 63042

Title	DIRECTOR
Name	MONTGOMERY, JOHN H
Address	135 N. MERAMEC
City-State-Zip:	CLAYTON MO 63105

Title	DIRECTOR
Name	SEIFERT, SHELLEY J
Address	135 N. MERAMEC
City-State-Zip:	CLAYTON MO 63105

Title	TREASURER
Name	NORMILE, MICHAEL J.
Address	135 N. MERAMEC
City-State-Zip:	CLAYTON MO 63105

Title	DIRECTOR
Name	DIERBERG, MICHAEL J.
Address	135 N. MERAMEC
City-State-Zip:	CLAYTON MO 63105

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: ANNETTE R. CARSON**SR. VICE PRESIDENT****03/16/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date