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

DOCUMENT# F19000003933

**Entity Name: SILICON VALLEY BANK** 

**Current Principal Place of Business:** 

3003 TASMAN DRIVE SANTA CLARA, CA 95054

**Current Mailing Address:** 

3003 TASMAN DRIVE

SANTA CLARA, CA 95054 US

FEI Number: 94-2875288 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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

FILED Jun 05, 2020

**Secretary of State** 

1354734526CC

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR DAVIS, ALISON MATTHEWS, KAY Name Name Address 3003 TASMAN DRIVE 3003 TASMAN DRIVE Address City-State-Zip: SANTA CLARA CA 95054 SANTA CLARA CA 95054 City-State-Zip:

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 CLENDENING, JOHN
 Name
 MILLER, MARY

Address 3003 TASMAN DRIVE Address 3003 TASMAN DRIVE

City-State-Zip: SANTA CLARA CA 95054 City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR Title DIRECTOR

NameMAGGIONCALDA, JEFFNameSTAGLIN, GARENAddress3003 TASMAN DRIVEAddress3003 TASMAN DRIVE

City-State-Zip: SANTA CLARA CA 95054 City-State-Zip: SANTA CLARA CA 95054

TitleDIRECTORTitleDIRECTORNameROBINSON, JOHNNameMITCHELL, KATEAddress3003 TASMAN DRIVEAddress3003 TASMAN DRIVE

City-State-Zip: SANTA CLARA CA 95054 City-State-Zip: SANTA CLARA CA 95054

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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: LEEANN OVERSTREET

**SECRETARY** 

06/05/2020

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name FRIEDMAN, JOEL

Address 3003 TASMAN DRIVE

City-State-Zip: SANTA CLARA CA 95054

Title SECRETARY

Name OVERSTREET, LEEANN

Address 3003 TASMAN DRIVE

City-State-Zip: SANTA CLARA CA 95054

Title PRESIDENT/CEO
Name BECKER, GREG

Address 3003 TASMAN DRIVE

City-State-Zip: SANTA CLARA CA 95054

Title DIRECTOR

Name BENHAMOU, ERIC

Address 3003 TASMAN DRIVE

City-State-Zip: SANTA CLARA CA 95054

Title TREASURER/CFO

Name BECK, DAN

Address 3003 TASMAN DRIVE

City-State-Zip: SANTA CLARA CA 95054