

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G19959

**FILED**  
**Apr 29, 2016**  
**Secretary of State**  
**CC7033330548**

**Entity Name:** SEACOAST BANKING CORPORATION OF FLORIDA

**Current Principal Place of Business:**

815 COLORADO AVENUE  
STUART, FL 34995-9012

**Current Mailing Address:**

815 COLORADO AVENUE  
P.O. BOX 9012  
STUART, FL 34995-9012

**FEI Number:** 59-2260678

**Certificate of Status Desired:** No

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

HUDSON, DENNIS S III  
815 COLORADO AVE.  
STUART, FL 34994 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 D  
Name HUDSON, DENNIS SJR  
Address 157 S RIVER RD, SEWALLS PT  
City-State-Zip: STUART FL 34996

Title D  
Name HUDSON, DALE M  
Address 192 SE HARBOR PT DRIVE  
City-State-Zip: STUART FL 34996

Title CD  
Name HUDSON, DENNIS SIII  
Address 2341 NW BAY COLONY COURT  
City-State-Zip: STUART FL 34994

Title D  
Name CRANE, JOHN H  
Address 7508 SE AUTUMN LANE  
City-State-Zip: HOBE SOUND FL 33455

*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:** DENNIS HUDSON

CD

04/29/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date