

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000087338

Entity Name: FLAGLER BANCSHARES CORPORATION**Current Principal Place of Business:**555 NORTHLAKE BLVD
NORTH PALM BEACH, FL 33408**Current Mailing Address:**555 NORTHLAKE BLVD
NORTH PALM BEACH, FL 33408**FEI Number:** 47-2383976**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STERLING, EDWARD C
555 NORTHLAKE BLVD
NORTH PALM BEACH, FL 33408 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 STERLING, EDWARD C
Address 555 NORTHLAKE BLVD
City-State-Zip: NORTH PALM BEACH FL 33408

Title DIRECTOR
Name HESSEL, FRANK JAY
Address 2675 SO BAYSHORE DRIVE, #801
City-State-Zip: MIAMI FL 33133

Title DIRECTOR
Name MACKAIL, RON T
Address 1094 TEQUESTA TRAIL
City-State-Zip: LAKE WALES FL 33898

Title DIRECTOR
Name WEISS, HERBERT
Address 7766 WINDY LARGO CT
City-State-Zip: LAKE WORTH FL 33467

Title PRESIDENT, DIRECTOR
Name SCHRAM, RONALD Y
Address 1420 N OCEAN BLVD
City-State-Zip: PALM BEACH FL 33480

Title DIRECTOR
Name LAMPERT, ARNOLD
Address 2900 LE BATEAU DRIVE
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR
Name WALK, GARY
Address 13451 WILLIAM MEYER CT
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR
Name BENSON, SALLY S
Address 1200 SE ATLANTIC DRIVE
City-State-Zip: LANTANA FL 33462

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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: EDWARD C STERLING

PRESIDENT

04/28/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	STOCK, KEITH
Address	201 TRESSER BLVD, #345
City-State-Zip:	STAMFORD CT 06901-3435