2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000016789

Entity Name: WEST FLORIDA BANK CORPORATION

Current Principal Place of Business:

29750 U.S. HWY 19 NORTH

SUITE 100

CLEARWATER, FL 33761

Current Mailing Address:

29750 U.S. HWY 19 NORTH SUITE 100

CLEARWATER, FL 33761 US

FEI Number: 83-4088782 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

IGLER AND PEARLMAN, P.A. 2457 CARE DRIVE, STE. 203 TALLAHASSEE, FL 32308 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Jan 30, 2025

Secretary of State

7834860103CC

Officer/Director Detail:

SUITE 100

CLEARWATER FL 33761

 Title
 DIRECTOR
 Title
 CHAIRMAN/CEO

 Name
 MCGIVNEY, ROBERT B.
 Name
 WIKLE, PAUL J.

Address 29750 U.S. HWY 19 NORTH Address 29750 U.S. HWY 19 NORTH

SUITE 100

CLEARWATER FL 33761

City-State-Zip: CLEARWATER FL 33761 City-State-Zip: CLEARWATER FL 33761

Title DIRECTOR Title DIRECTOR

Name DAVID, BRANDON L. Name HOCKMAN, RONALD S.

Address 29750 U.S. HWY 19 NORTH Address 29750 U.S. HWY 19 NORTH

SUITE 100 SUITE 100

Title DIRECTOR Title DIRECTOR

Name KLEIN, MARK S. Name OLIVERI, JOSEPH L.

Address 29750 U.S. HWY 19 NORTH Address 29750 U.S. HWY 19 NORTH

SUITE 100 SUITE 100

City-State-Zip: CLEARWATER FL 33761 City-State-Zip: CLEARWATER FL 33761

 Title
 DIRECTOR
 Title
 PRESIDENT

 Name
 SEMBLER, BRENT W.
 Name
 KEY, DAVID B

Address 29750 U.S. HWY 19 NORTH Address 29750 U.S. HWY 19 NORTH

SUITE 100 SUITE 100

City-State-Zip: CLEARWATER FL 33761 City-State-Zip: CLEARWATER FL 33761

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City-State-Zip:

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: TAMMY BRIGMOND CORPORATE 01/30/2025 SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

DIRECTOR

29750 U.S. HWY 19 NORTH

Address

Title

City-State-Zip:

CFO Title Title DIRECTOR

Name BAILEY, KENNETH E. Name MARKS, O. KEN 29750 U.S. HWY 19 NORTH

SUITE 100 SUITE 100

CLEARWATER FL 33761 City-State-Zip: CLEARWATER FL 33761

Address

Title

CORPORATE SECRETARY

SPROWLS, CHRISTOPHER Name BRIGMOND, TAMMY D Name

Address 29750 U.S. HWY 19 NORTH Address 29750 U.S. HWY 19 NORTH

SUITE 100 SUITE 100

City-State-Zip: CLEARWATER FL 33761 City-State-Zip: CLEARWATER FL 33761