

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002368

Entity Name: TRUIST BANK**Current Principal Place of Business:**214 NORTH TRYON STREET
CHARLOTTE, NC 28202**Current Mailing Address:**C/O HASANA STANBERRY
214 NORTH TRYON STREET 44TH FLOOR
CHARLOTTE, NC 28202 US**FEI Number:** 56-1074313**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 DIRECTOR
Name BUNDY SCANLAN, AGNES
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name TANNER, BRUCE L.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name PATTON, CHARLES A.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name SEARS, CHRISTINE
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title VICE CHAIRMAN, CHIEF RISK OFFICER
Name STARNES, CLARKE R. III
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name CLEMENT, DALLAS S.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name MOREA, DONNA S.
Address 303 PEACHTREE STREET
30TH FLOOR
City-State-Zip: ATLANTA GA 30308

Title ASSISTANT VICE PRESIDENT
Name STANBERRY, HASANA
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

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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: HASANA STANBERRYASSISTANT VICE
PRESIDENT

04/21/2025

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title VICE CHAIRMAN, CHIEF OPERATING OFFICER
Name CUMMINS, HUGH S. BEAU III
Address 303 PEACHTREE STREET
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR
Name BOYER, K. DAVID JR.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title SENIOR VICE PRESIDENT
Name MCNEEL, MENDY
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name VOORHEES, STEVEN C.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR, CEO
Name ROGERS, WILLIAM H. JR.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name CABLIK, ANNA R.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name MAYNARD, EASTER A.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title CHAIRMAN, DIRECTOR
Name KING, KELLY S.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name QUEBEIN, NIDO R.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name THOMPSON, THOMAS N.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name BANNER, JENNIFER S.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name HAYNESWORTH, LINNIE M.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name GRANEY, PATRICK C. III
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name SKAINS, THOMAS E.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title VICE PRESIDENT
Name RAMEY, KATRINA
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name RADCLIFFE, DAVID M.
Address 303 PEACHTREE STREET
30TH FLOOR
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR
Name SCRUGGS, FRANK P. JR.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title CHIEF FINANCIAL OFFICER
Name MAGUIRE, MICHAEL B.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR
Name DONAHUE, PAUL D.
Address 214 NORTH TRYON STREET
City-State-Zip: CHARLOTTE NC 28202