

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001803

Entity Name: EVERBANK COMMERCIAL FINANCE, INC.**Current Principal Place of Business:**10 WATERVIEW BLVD.
PARSIPPANY, NJ 07054**Current Mailing Address:**10 WATERVIEW BLVD.
PARSIPPANY, NJ 07054**FEI Number:** 20-0716627**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 TREASURER, PRESIDENT, COO
Name HILZINGER, JEFFREY
Address 10 WATERVIEW BOULEVARD
City-State-Zip: PARSIPPANY NJ 07054

Title DIRECTOR
Name CLEMENTS, ROBERT M
Address 501 RIVERSIDE AVE., 12TH FLOOR
City-State-Zip: JACKSONVILLE FL 32202

Title SECRETARY
Name CAREY, WILLIAM
Address 10 WATERVIEW BOULEVARD
City-State-Zip: PARSIPPANY NJ 07054

Title DIRECTOR
Name WILSON, W. BLAKE
Address 501 RIVERSIDE
City-State-Zip: JACKSONVILLE FL 32202

Title VP
Name BAUM, MARK G
Address 501 RIVERSIDE AVE
 12TH FLOOR
City-State-Zip: JACKSONVILLE FL 32202

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: WILLIAM CAREY**SECRETARY****04/29/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date