## Edgar Filing: SEACOAST BANKING CORP OF FLORIDA - Form 5

SEACOAST BANKING CORP OF FLORIDA Form 5

February 03, 2014						
FORM 5				OMB AF	PPROVAL	
Check this box if	UNITED STATES	S SECURITIES AND EXCHANGE ( Washington, D.C. 20549	COMMISSION	OMB Number: Expires:	3235-0362 January 31,	
no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction	ANNUAL ST	Estimated a burden hour response	rs per			
See Instruction 1(b).Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,Form 3 HoldingsSection 17(a) of the Public Utility Holding Company Act of 1935 or SectionReported Form 430(h) of the Investment Company Act of 1940Transactions ReportedReported						
1. Name and Address of Goldman Roger	of Reporting Person <u>*</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol SEACOAST BANKING CORP OF FLORIDA [SBCF]	5. Relationship of Issuer (Check	Reporting Pers		
(Last) (Fi	irst) (Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2013	X Director Officer (give t below)		Owner er (specify	
P.O. BOX 9012						
(St	reet)	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Jo	int/Group Repo	C C	
STUART, FL :	34995		_X_ Form Filed by C Form Filed by M Person			

(City)	(State) (2	Zip) Table	e I - Non-Deri	vative Sec	curitie	s Acqu	ired, Disposed o	f, or Beneficial	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi Acquired Disposed (Instr. 3, Amount	d (A) of d of (D 4 and (A) or	))	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	Â	Â	Â	Â	Â	Â	2,000 (1)	D (2)	Â
Common Stock	Â	Â	Â	Â	Â	Â	23,592 <u>(1)</u>	D <u>(3)</u>	Â
Common Stock	Â	Â	Â	Â	Â	Â	14 <b>,</b> 260 <u>(1)</u>	D (4)	Â
Common Stock	Â	Â	Â	Â	Â	Â	1,600 <u>(1)</u>	Ι	Held in spouse's IRA

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Common Stock	Â	Â	Â	Â	Â	1,200 (1) (5) I (6)	Held in Trust	n	
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.SEC 2270 (9-02)									
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned   (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9 1 9 1 1 1 1 (

(A) (E	Exercisable	Expiration Date Title	Amount or Number of Shares
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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>					
	Director	10% Owner	Officer	Other	
Goldman Roger P.O. BOX 9012 STUART, FL 34995	ÂX	Â	Â	Â	
Signatures					
Sharon Mehl as Power of Attor Goldman	mey for H	Roger O.		02/03/2014	

<u>\*\*</u>Signature of Reporting Person Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Date

- (1) All amounts adjusted to reflect effect of one-for-five reverse stock split effective 12/13/13.
- (2) Previously these shares were erroneously reported as held indirectly by spouse
- (3) Held in Seacoast's Non-Employee Directors Deferred Compensation Plan for which receipt of such shares has been deferred, and as to which shares Mr. Goldman has no voting or dispositive power
- (4) Held in IRA; shares voting and investment power
- (5) Previously the number of shares held in the trust were erroneously reported. This reflects the corrected total.

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(6) Held in special needs trust for which spouse is trustee; disclaims beneficial ownership

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.