

# SEACOAST BANKING CORP OF FLORIDA

Reported by  
**GOEBEL MARYANN**

## FORM 5

(Annual Statement of Changes in Beneficial Ownership)

Filed 02/11/26 for the Period Ending 12/31/25

Address	815 COLORADO AVE P O BOX 9012 STUART, FL, 34994
Telephone	772 288 6063
CIK	0000730708
Symbol	SBCF
SIC Code	6022 - State Commercial Banks
Industry	Banks
Sector	Financials
Fiscal Year	12/31

# FORM 5

☐ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

☐ Form 3 Holdings Reported  
☐ Form 4 Transactions Reported

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or  
Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *			2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
GOEBEL MARYANN			SEACOAST BANKING CORP OF FLORIDA [SBCF]			<input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)		
(Last) (First) (Middle)			3. Statement for Issuer's Fiscal Year Ended (MM/DD/YYYY)					
SEACOAST BANKING CORPORATION OF FLORIDA, P. O. BOX 9012			12/31/2025					
(Street)			4. If Amendment, Date Original Filed(MM/DD/YYYY)			6. Individual or Joint/Group Filing(Check Applicable Line)		
STUART, FL 34995						<input checked="" type="checkbox"/> Form Filed by One Reporting Person <input type="checkbox"/> Form Filed by More than One Reporting Person		
(City) (State) (Zip)								

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Trans. Date	2A. Deemed Execution Date, if any	3. Trans. Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Amount	(A) or (D)	Price			
Common Stock							31,714.1148	D (1)	
Common Stock							6,000	D (2)	

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (MM/DD/YYYY)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned at End of Issuer's Fiscal Year (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Common Stock Right to Buy (3)	\$14.39						2/3/2016	2/3/2026	Common Stock	3,419		3,419	D	
Common Stock Right to Buy (3)	\$22.65						2/6/2017	2/6/2027	Common Stock	2,142		2,142	D	

### Explanation of Responses:

- (1) Held in Seacoast's Non-employee Directors Deferred Compensation Plan  
(2) Held in revocable trust  
(3) Granted pursuant to Seacoast Banking Corporation of Florida's 2013 Incentive Plan

### Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
GOEBEL MARYANN				

SEACOAST BANKING CORPORATION OF FLORIDA P. O. BOX 9012 STUART, FL 34995	X			
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**Signatures**

**/s/ Kathy L. Hsu as Power of Attorney for Maryann Goebel**

**2/11/2026**

Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

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.