EverBank Financial Corp Form 4 May 23, 2016

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB 3

Number: 3235-0287

Expires: January 31, 2005

0.5

OMB APPROVAL

Estimated average burden hours per response...

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * MYLOD ROBERT J JR | | | 2. Issuer Name and Ticker or Trading Symbol | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
|---|-----------------------|------------|--|--------------------------------|--|-----------|--|---|------------------|--------------|--|
| | | | EverBank Financial Corp [EVER] | | | | (Check all applicable) | | | | |
| (Last) | (First) | (Middle) | 3. Date of | Earliest Tra | insaction | | | | | | |
| | | | (Month/Day/Year) | | | | _X_ Director | 10% | 6 Owner | | |
| 40701 WOODARD AVE. SUITE 101 | | | 05/19/2016 | | | | Officer (give title Other (specify below) | | | | |
| | (Street) | | | 4. If Amendment, Date Original | | | | 6. Individual or Joint/Group Filing(Check | | | |
| | , , | | Filed(Month/Day/Year) | | | | | Applicable Line) | | | |
| BLOOMFIE | Fried(Monun/Day/Tear) | | | | _X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (State) | (Zip) | Table | e I - Non-De | erivative S | Securi | ties Ac | quired, Disposed | of, or Beneficia | lly Owned | |
| 1.Title of | 2. Transaction Da | ate 2A. De | emed | 3. | 4. Securi | ties | | 5. Amount of | 6. Ownership | 7. Nature of | |
| Security | (Month/Day/Year | r) Executi | on Date, if | Transactio | nAcquired | l (A) c | or | Securities | Form: Direct | Indirect | |
| (Instr. 3) any | | | Code Disposed of (D) | | | | | Beneficially (D) or Beneficia | | | |
| , | | • | /Day/Year) | (Instr. 8) | * ' | | * | Owned | Indirect (I) | Ownership | |
| | | ` | , | , , , | | | | Following | (Instr. 4) | (Instr. 4) | |
| | | | | | | (4) | | Reported | | | |
| | | | | | | (A) | | Transaction(s) | | | |
| | | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | | |
| Common | | | | Couc v | Amount | (D) | Titee | | | | |
| | 05/01/0016 | | | M | 2.601 | | Φ.Ω | 551 015 | D | | |
| Stock, par value \$0.01 | 05/21/2016 | | | M | 2,601 | A | \$0 | 551,915 | D | | |

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 1474

(9-02)

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

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| 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. Numb orDerivati Securitic Acquire Dispose (Instr. 3, | ve es d (A) or d of (D) | Expiration Date (Month/Day/Year) A) or f (D) | | 7. Title and Amount Underlying Securitie (Instr. 3 and 4) | |
|---|---|---|---|---|--|----------------------------------|--|-----------------|---|------------------------------------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amou or Numb of Shares |
| Restricted Common Stock Unit | \$ 0 | 05/21/2016 | | M | | 2,601 | 05/21/2016 | 05/21/2016 | Common Stock, par value \$0.01 | 2,60 |
| Restricted Common Stock Unit | \$ 0 | 05/19/2016 | | A | 3,533 | | 05/19/2017 | 05/19/2017 | Common Stock, par value \$0.01 | 3,53 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|-----------|---------|-------|--|--|
| · F · · · 6 · · · · · · · · · · · · · · · · · · · | Director | 10% Owner | Officer | Other | | |
| MYLOD ROBERT J JR 40701 WOODARD AVE. SUITE 101 BLOOMFIELD HILLS, MI 48304 | X | | | | | |

Signatures

/s/ Jean-Marc Corredor as Attorney-in-Fact

**Signature of Reporting Person Date

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).

05/23/2016

Note: File three copies of this Form, one of which must be manually signed. If space 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.

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