2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2013
Secretary of State
CC3430331817

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Entity Name: HARRISON LOAN COMPANY

Current Principal Place of Business:

2510 14TH STREET
GULFPORT, MS 39501

Current Mailing Address:

228 ST. CHARLES AVENUE, SUITE626
ATTN: TERESA LYGATE
NEW ORLEANS, LA 70130 US

FEI Number: 27-3671141

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	CHANEY, CARL J.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	D
Name	HILL, RICHARD T
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	DIRECTOR, PRESIDENT
Name	MOORE, KENNETH
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	VP
Name	JUDAH, CHRIS
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	DIRECTOR
Name	HAIRSTON, JOHN M.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 30501

Title	VP
Name	SPRIGGS, MIKE
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	VP
Name	BRUZZESE, JOHN
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	VP
Name	MAYO, JEANNE
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Continues on page 2

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: TERESA Z. LYGATE ASSISTANT SECRETARY 04/29/2013

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	VP
Name	JONES, PATRICK
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	ASST. SECRETARY
Name	LYGATE, TERESA Z.
Address	228 ST. CHARLES AVENUE, SUITE 626
City-State-Zip:	NEW ORLEANS LA 70130

Title	TREASURER, SECRETARY
Name	PARRISH, MEGHAN
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501