2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2013
Secretary of State
CC3114198761

DOCUMENT# F11000001257

Entity Name: WHITNEY BANK

Current Principal Place of Business:

228 ST. CHARLES AVENUE
NEW ORLEANS, LA 70130

Current Mailing Address:

228 ST. CHARLES AVENUE, SUITE 626
ATTN: TERESA LYGATE
NEW ORLEANS, LA 70130 US

FEI Number: 72-1171087

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
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	CEOD
Name	CHANEY, CARL J
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	P
Name	EXNICIOS, JOSEPH S
Address	228 ST. CHARLES AVENUE
City-State-Zip:	NEW ORLEANS LA 70130

Title	EVPS
Name	PHILLIPS, JOY L
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	CHAIRMAN
Name	PACE, JOHN H.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	CEOD
Name	HAIRSTON, JOHN M
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	EVP, CFO
Name	ACHARY, MICHAEL M
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

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

Title	EVP
Name	FRANCIS, EDWARD G.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

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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 — VP & SR. ASST. CORPORATE SECRETARY — 04/29/2013

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

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

Title	EVP, CRO
Name	LOPER, D. SHANE
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	EVP
Name	THOMAS, SUZANNE C.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	SVP, AS
Name	AYRES, ANIKO K.
Address	228 ST. CHARLES AVENUE, SUITE 626
City-State-Zip:	NEW ORLEANS LA 70130

Title	SVP, AS
Name	SMITH, ADRIAN
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	DIRECTOR
Name	ANGERS, JEFFERSON M.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	DIRECTOR
Name	MILLING, R. KING
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	DIRECTOR
Name	STIRLING, LEWIS W. III
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	EVP
Name	KENDRICKS, SAMUEL B.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	EVP
Name	SAIK, CLIFTON J.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	SVP, CAO
Name	BARKER, STEPHEN E.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	VP, AS
Name	LOUPE, PATRICIA K.
Address	228 ST. CHARLES AVENUE
City-State-Zip:	NEW ORLEANS LA 70130

Title	DIRECTOR
Name	ANDERSON, RONALD R.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	DIRECTOR
Name	LIPPMAN, ALFRED S.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	DIRECTOR
Name	OLINDE, THOMAS H.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501

Title	DIRECTOR
Name	WESTFELDT, THOMAS D.
Address	2510 14TH STREET
City-State-Zip:	GULFPORT MS 39501