

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000005054

**Entity Name:** ARGENT TRUST COMPANY**Current Principal Place of Business:**3102 WEST END AVENUE, SUITE 775  
NASHVILLE, TN 37203**Current Mailing Address:**500 EAST REYNOLDS DR.  
RUSTON, LA 71270 US**FEI Number:** 62-1437218**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCRP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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:** D. KYLE MCDONALD

05/19/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name MCDONALD, D. KYLE  
Address 500 EAST REYNOLDS DR  
City-State-Zip: RUSTON LA 71270

Title DIRECTOR  
Name GANIER, JAMES H  
Address 540 FIELDS DR  
City-State-Zip: ARLINGTON TN 38002

Title DIRECTOR  
Name JONES, JAMES R  
Address 2425 GOLF CLUB LANE  
City-State-Zip: NASHVILLE TN 37215

Title DIRECTOR, COO  
Name WADE, CHARLIE  
Address 755 EAST MULBERRY, SUITE 400  
City-State-Zip: SAN ANTONIO TX 78212

Title DIRECTOR  
Name DICKEY, JAMES SJR  
Address 6055 PRIMACY PKWY STE 450  
City-State-Zip: MEMPHIS TN 38119

Title CEO  
Name SAFER, HOWARD  
Address 3100 WEST END AVENUE, SUITE 150  
City-State-Zip: NASHVILLE TN 37203

Title DIRECTOR  
Name BUCHANAN, JACK P  
Address 1081 TULIPWOOD LN  
City-State-Zip: ATHENS GA 30606

Title DIRECTOR, EXECUTIVE VICE  
PRESIDENT  
Name WILLIAMS, DAVID  
Address 1100 ABERNATHY ROAD, SUITE 550  
City-State-Zip: ATLANTA GA 30328

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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:** D. KYLE MCDONALD

CHAIRMAN

05/19/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                 DIRECTOR  
Name                ALDERMAN, KEN  
Address             600 UNIVERSITY PARK PLACE, SUITE 300  
City-State-Zip:    HOMEWOOD AL 35209

Title                 DIRECTOR  
Name                MEAD, LISA NARRELL  
Address             1635 WOODBRIDGE PLACE  
City-State-Zip:    BIRMINGHAM AL 35216

Title                 DIRECTOR  
Name                LINKER, ALAN  
Address             6401 WALNUT TRAIL RIDGE  
City-State-Zip:    PROSPECT KY 40059-8867

Title                 DIRECTOR, CHIEF FIDUCIARY  
                         OFFICER  
Name                REID, HARRELL  
Address             500 EAST REYNOLDS DR.  
City-State-Zip:    RUSTON LA 71270