## 2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000005063

**Entity Name: HANCOCK WHITNEY CORPORATION** 

**Current Principal Place of Business:** 

2510 14TH STREET GULFPORT, MS 39501

**Current Mailing Address:** 

701 POYDRAS STREET ATTN: KYNA N. SMITH NEW ORLEANS, LA 70139 US

FEI Number: 64-0693170 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

C T CORPORATION 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:

Address

Date Electronic Signature of Registered Agent

Name

Officer/Director Detail:

DIRECTOR, CEO, PRESIDENT Title Title SEVP, COO

Name HAIRSTON, JOHN M. LOPER, D. SHANE Name Address 2510 14TH STREET Address **2510 14TH STREET** 

**GULFPORT MS 39501** City-State-Zip: **GULFPORT MS 39501** City-State-Zip:

Title SEVP, CORPORATE SECRETARY Title SEVP. CFO

Name PHILLIPS, JOY LAMBERT Name ACHARY, MICHAEL M. Address 2510 14TH STREET 701 POYDRAS STREET Address

> **SUITE 3400** City-State-Zip: **GULFPORT MS 39501**

City-State-Zip: NEW ORLEANS LA 70139

Title EVP, CHIEF ACCOUNTING OFFICER Title **SEVP** BARKER, STEPHEN E.

Name EXNICIOS, JOSEPH S. 701 POYDRAS STREET Address

701 POYDRAS STREET Address **SUITE 3400** 

**SUITE 3400** 

City-State-Zip: NEW ORLEANS LA 70139 City-State-Zip: NEW ORLEANS LA 70139

Title SR. ASSISTANT CORPORATE Title

SR. ASSISTANT CORPORATE SECRETARY **SECRETARY** 

LOUPE, PATRICIA K. Name AYRES, ANIKO K.

Name Address 701 POYDRAS STREET

> 701 POYDRAS STREET **SUITE 3400**

**SUITE 3000** 

NEW ORLEANS LA 70139 City-State-Zip: City-State-Zip: NEW ORLEANS LA 70139

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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.

04/29/2021 SIGNATURE: KYNA SMITH ASST SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Apr 29, 2021

**Secretary of State** 

3260616155CC

Officer/Director Detail Continued:

Title SR. ASSISTANT CORPORATE SECRETARY

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

Title DIRECTOR

Name FOWLER, HARDY B.

Address 2510 14TH STREET

City-State-Zip: GULFPORT MS 39501

Title DIRECTOR

Name HORNE, JAMES H.
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 ROSEBERRY, ROBERT W.

Address 2510 14TH STREET

City-State-Zip: GULFPORT MS 39501

Title TREASURER

Name GANUCHEAU, ALAN M
Address 701 POYDRAS STREET
15TH FLOOR SUITE 301

City-State-Zip: NEW ORLEANS LA 70139

Title EVP

Name KNIGHT, CECIL W JR.
Address 701 POYDRAS STREET

**SUITE 3400** 

City-State-Zip: NEW ORLEANS LA 70139

Title DIRECTOR

Name TEOFILO, JOAN C Address 2510 14TH STREET

City-State-Zip: GULFPORT MS 39501

Title EVP, CHIEF CREDIT OFFICER

Name ZILUCA, CHRISTOPHER
Address 701 POYDRAS STREET

**SUITE 3400** 

City-State-Zip: NEW ORLEANS LA 70139

Title DIRECTOR

Name KENT, SUZETTE K
Address 2510 14TH STREET
City-State-Zip: GULFPORT MS 39501

Title DIRECTOR

Name BERTUCCI, FRANK E.

Address 2510 14TH STREET

City-State-Zip: GULFPORT MS 39501

Title DIRECTOR

Name HANNA, RANDALL W.
Address 2510 14TH STREET
City-State-Zip: GULFPORT MS 39501

Title DIRECTOR

Name LEVENS, JERRY L.

Address 2510 14TH STREET

City-State-Zip: GULFPORT MS 39501

Title DIRECTOR

Name PICKERING, CHRISTINE L.

Address 2510 14TH STREET
City-State-Zip: GULFPORT MS 39501

Title DIRECTOR

Name LITTLE, SONYA C.
Address 2510 14TH STREET
City-State-Zip: GULFPORT MS 39501

Title CORPORATE TAX OFFICER

Name LEW, BONNIE

Address 701 POYDRAS STREET

**SUITE 1500** 

City-State-Zip: NEW ORLEANS LA 70139

Title DIRECTOR

Name LIOLLIO, CONSTANTINE S

Address 2510 14TH STREET
City-State-Zip: GULFPORT MS 39501

Title DIRECTOR

Name WILKINS, C RICHARD
Address 2510 14TH STREET
City-State-Zip: GULFPORT MS 39501

Title ASST VP, SENIOR ASST CORPORATE

**SECRETARY** 

Name SMITH, KYNA

Address 701 POYDRAS STREET

SUITE 3000

City-State-Zip: NEW ORLEANS LA 70115