2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000005063

Entity Name: HBHC COMPANY

Current Principal Place of Business:

2510 14TH STREET

GULFPORT, MS 39501

Current Mailing Address:

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

FEI Number: 64-0693170

Name and Address of Current Registered Agent:

C T CORPORATION 1200 SOUTH PINE ISLAND ROAD

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:

Name

Electronic Signature of Registered Agent

Date

FILED Apr 13, 2015

Secretary of State

CC8701252990

Officer/Director Detail:

PLANTATION, FL 33324 US

Title DIRECTOR, CEO, PRESIDENT

HAIRSTON, JOHN M.

Address 2510 14TH STREET

GULFPORT MS 39501 City-State-Zip:

Title EVP. CFO

Name ACHARY, MICHAEL M.

Address 228 ST. CHARLES AVENUE

EXECUTIVE OFFICES

City-State-Zip: NEW ORLEANS LA 70130

Title SR. ASSISTANT CORPORATE

SECRETARY

LYGATE, TERESA Z. Name

228 ST. CHARLES AVENUE, SUITE Address

City-State-Zip: NEW ORLEANS LA 70130

Title **EVP**

Name EXNICIOS, JOSEPH S.

Address

228 ST. CHARLES AVENUE

EXECUTIVE OFFICES

City-State-Zip: NEW ORLEANS LA 70130

Certificate of Status Desired: No

Title EVP, COO

Name LOPER, D. SHANE

Address **2510 14TH STREET**

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

Title **EVP. CORPORATE SECRETARY**

Name PHILLIPS, JOY LAMBERT

Address 2510 14TH STREET

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

Title CHAIRMAN

ESTABROOK, JAMES B. JR. Name

2510 14TH STREET Address

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

Title **EVP**

Name FRANCIS, EDWARD G.

Address 228 ST. CHARLES AVENUE

EXECUTIVE OFFICES

NEW ORLEANS LA 70130 City-State-Zip:

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

SR. ASSISTANT **CORPORATE SECRETARY**

04/13/2015

Officer/Director Detail Continued: Title **EVP** Title **EVP** KENDRICKS, SAMUEL B. SAIK, CLIFTON J. Name Name Address **2510 14TH STREET** Address 228 ST. CHARLES AVENUE **EXECUTIVE OFFICES GULFPORT MS 39501** City-State-Zip: NEW ORLEANS LA 70130 City-State-Zip: EVP Title Title SVP, CHIEF ACCOUNTING OFFICER Name THOMAS, SUZANNE C. Name BARKER, STEPHEN E. Address 228 ST. CHARLES AVENUE 228 ST. CHARLES AVENUE Address **EXECUTIVE OFFICES** City-State-Zip: NEW ORLEANS LA 70130 City-State-Zip: NEW ORLEANS LA 70130 Title SR. ASSISTANT CORPORATE SR. ASSISTANT CORPORATE SECRETARY Title **SECRETARY** Name AYRES, ANIKO K. LOUPE, PATRICIA K. Name 228 ST. CHARLES AVENUE, SUITE 626 Address 228 ST. CHARLES AVENUE Address City-State-Zip: NEW ORLEANS LA 70130 **EXECUTIVE OFFICES** City-State-Zip: NEW ORLEANS LA 70130 Title SR. ASSISTANT CORPORATE SECRETARY Title **DIRECTOR** Name SMITH, ADRIAN Name BERTUCCI, FRANK E. Address **2510 14TH STREET** Address **2510 14TH STREET** City-State-Zip: **GULFPORT MS 39501** City-State-Zip: **GULFPORT MS 39501** Title **DIRECTOR** Title DIRECTOR FOWLER, HARDY B. Name HALL, TERENCE E. Name 2510 14TH STREET Address Address 2510 14TH STREET **GULFPORT MS 39501** City-State-Zip: City-State-Zip: **GULFPORT MS 39501** Title DIRECTOR Title **DIRECTOR** HANNA, RANDALL W. Name Name HORNE, JAMES H. Address **2510 14TH STREET** Address 2510 14TH STREET City-State-Zip: **GULFPORT MS 39501** City-State-Zip: **GULFPORT MS 39501** Title DIRECTOR Title **DIRECTOR** Name LEVENS, JERRY L. NICKELSEN, ERIC J. Name Address **2510 14TH STREET** Address 2510 14TH STREET GULFPORT MS 39501 City-State-Zip: City-State-Zip: **GULFPORT MS 39501** Title **DIRECTOR** Title **DIRECTOR** Name OLINDE, THOMAS H. Name PICKERING, CHRISTINE L. Address **2510 14TH STREET** Address 2510 14TH STREET City-State-Zip: **GULFPORT MS 39501** City-State-Zip: **GULFPORT MS 39501** Title DIRECTOR Title **DIRECTOR** Name ROSEBERRY, ROBERT W. Name TOPAZI, ANTHONY J. Address **2510 14TH STREET** Address 2510 14TH STREET

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

Title SVP, CHIEF RISK OFFICER Name DICKERSON, MICHAEL K.

2510 14TH STREET Address **GULFPORT MS 39501**

City-State-Zip:

Name DUGAL, GERALD S

City-State-Zip:

Title

228 ST. CHARLES AVENUE Address NEW ORLEANS LA 70130 City-State-Zip:

GULFPORT MS 39501

SVP, TREASURER

Title CORPORATE TAX OFFICER
Name LESTELLE, ELIZABETH M.
Address 228 ST. CHARLES AVENUE
City-State-Zip: NEW ORLEANS LA 70130