

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000002440

**Entity Name:** RELIANCE TRUST COMPANY

**Current Principal Place of Business:**

201 17TH ST NW, SUITE 1000  
ATLANTA, GA 30363

**Current Mailing Address:**

201 17TH ST NW, SUITE 1000  
ATLANTA, GA 30363 US

**FEI Number:** 58-1428634

**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

**FILED**  
**Apr 25, 2021**  
**Secretary of State**  
**3575157755CC**

*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 DUVAL, BRIAN J.  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title DIRECTOR  
Name GUTHRIE, ANTHONY A. A  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title DIRECTOR  
Name HARLOW, WILLIAM C.  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title DIRECTOR  
Name HOAG, ERIK  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title PRESIDENT  
Name MCCABE, LUKE A.  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title DIRECTOR  
Name MOELING, WALTER G. G  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title DIRECTOR  
Name MORRIS, JOSEPH A. A.  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title DIRECTOR  
Name RAHBARI, KAIVAN  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

**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:** CHARLES R. , JR CURLEY

**SECRETARY**

**04/25/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name SCHULZE, HORST H. H.  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title SECRETARY  
Name CURLEY, CHARLES R. JR  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title SENIOR VICE PRESIDENT  
Name ALEXANDER, KRISTEN J.  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title SENIOR VICE PRESIDENT  
Name DEYO, DONALD  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title SENIOR VICE PRESIDENT  
Name GOLDBRUM, LARRY  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title SENIOR VICE PRESIDENT AND CHIEF  
RISK OFFICER  
Name FLORESS, RICK  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title TREASURER  
Name DAUGHTREY, VIRGINIA A.  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title SENIOR VICE PRESIDENT  
Name CARTER III, LOUIS J.  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363

Title SENIOR VICE PRESIDENT  
Name ENNIS, SHARON  
Address 201 17TH ST NW, SUITE 1000  
City-State-Zip: ATLANTA GA 30363