

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000002165

Entity Name: REPUBLIC BANCORP, INC.**Current Principal Place of Business:**601 WEST MARKET STREET
LOUISVILLE, KY 40202**Current Mailing Address:**601 WEST MARKET STREET
LOUISVILLE, KY 40202 US**FEI Number:** 61-0862051**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 CEO, DIRECTOR
Name TRAGER, STEVEN E
Address 601 WEST MARKET STREET
City-State-Zip: LOUISVILLE KY 40202

Title CFO
Name SIPES, KEVIN
Address 601 WEST MARKET STREET
City-State-Zip: LOUISVILLE KY 40202

Title SECRETARY
Name RINGSWALD, MICHAEL A
Address 601 WEST MARKET STREET
City-State-Zip: LOUISVILLE KY 40202

Title VC, PRESIDENT, DIRECTOR
Name TRAGER, A.SCOTT
Address 661 S HURSTBOURNE PARKWAY
City-State-Zip: LOUISVILLE KY 40222

Title DIRECTOR
Name STRATTON, R.WAYNE
Address 642 SOUTH 4TH STREET STE 300
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR
Name TAMME, SUSAN STOUT
Address 7106 OAK TERRACE
City-State-Zip: PEEWEE VALLEY KY 40056

Title DIRECTOR
Name RUST, MICHAEL T
Address 2501 NELSON MILLER PKWY
City-State-Zip: LOUISVILLE KY 40223

Title DIRECTOR
Name GREENBERG, CRAIG A
Address 710 WEST MAIN STREET, 3RD FLOOR
City-State-Zip: LOUISVILLE KY 40202

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: MICHAEL A RINGSWALD**SECRETARY****04/28/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MARK, VOGT A
Address	1031 ZORN AVENUE, SUITE 400
City-State-Zip:	LOUISVILLE KY 40207