

2019 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:**PENLEY, WENDY
9037 US HIGHWAY 19
PORT RICHEY, FL 34668 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 AMES, CHRISTY 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 601 WEST MARKET STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR
Name TAMME, SUSAN STOUT
Address 601 WEST MARKET STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR
Name RUST, MICHAEL T
Address 601 WEST MARKET STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR
Name GREENBERG, CRAIG A
Address 601 WEST MARKET STREET
City-State-Zip: LOUISVILLE KY 40202

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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: CHRISTY A AMES**SECRETARY****04/29/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MARK, VOGT A
Address 601 WEST MARKET STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR
Name TRAGER-KUSMAN, ANDREW
Address 601 WEST MARKET STREET
City-State-Zip: LOUISVILLE KY 40202