

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001632

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: REPUBLIC BANK & TRUST COMPANY

## Current Principal Place of Business:

601 W MARKET ST  
LOUISVILLE, KY 40202

## New Principal Place of Business:

## Current Mailing Address:

601 W MARKET ST  
LOUISVILLE, KY 40202

## New Mailing Address:

FEI Number: 61-0197400

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: MR ( ) Delete  
Name: RINGSWALD, MICHAEL A SEC  
Address: 601 W MARKET ST  
City-St-Zip: LOUISVILLE, KY 40202

Title: MR ( ) Delete  
Name: TRAGER, STEVE CEO  
Address: 601 W MARKET STREET  
City-St-Zip: LOUISVILLE, KY 40202

Title: MR ( ) Delete  
Name: TRAGER, BERNARD  
Address: 601 W MARKET ST  
City-St-Zip: LOUISVILLE, KY 40202

Title: MR ( ) Delete  
Name: TRAGER, SCOTT PRES  
Address: 601 W MARKET ST  
City-St-Zip: LOUISVILLE, KY 40202

Title: MR ( ) Delete  
Name: SIPES, KEVIN CFO  
Address: 601 W MARKET ST  
City-St-Zip: LOUISVILLE, KY 40202

Title: MR ( ) Delete  
Name: VEST, DAVID CLO  
Address: 601 W MARKET ST  
City-St-Zip: LOUISVILLE, KY 40202

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL A. RINGSWALD

SEC

04/25/2008

Electronic Signature of Signing Officer or Director

Date