2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2019
Secretary of State
8071062179CC

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Entity Name: FIRST BANK AND TRUST

Current Principal Place of Business:

909 POYDRAS ST, STE. 1700
NEW ORLEANS, LA 70112

Current Mailing Address:

909 POYDRAS ST, STE. 1700
NEW ORLEANS, LA 70112 US

FEI Number: 72-1189233

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLOSSMAN, KRISTEN
495 GRAND BLVD.
SUITE 270
MIRAMAR BEACH, FL 32550 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	C
Name	BOLLINGER, BOYSIE
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	D
Name	CANIZARO, JOE
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	CEO, D
Name	BLOSSMAN, GARY
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	D
Name	DENECHAUD, PATRICIA
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	VC
Name	GUIDRY, DAVID
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	D
Name	BLOSSMAN, FRED
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	D
Name	COX, RALPH
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	D
Name	HOWARD, RANDY
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

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: R. LEIGH BARKER — CHIEF ACCOUNTING OFFIER — 02/08/2019

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	D
Name	JEANSONNE, MARK
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	EVP, PRESIDENT
Name	ABADIE, DUANE
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	SVP, CHIEF ACCOUNTING OFFICER
Name	BARKER, LEIGH
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	DIRECTOR
Name	KRUSE, CRAIG
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	D
Name	LOPICCOLO, RYAN
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	SVP, CHIEF RISK OFFICER
Name	BLACKWELL, CHARLES
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	VP, CORPORATE SECRETARY
Name	HINKEL-HALEY, LISA
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

Title	DIRECTOR
Name	GEORGES, JOHN
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112