

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000005394

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	VC
Name	GUIDRY, DAVID
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	D
Name	BLOSSMAN, FRED
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	COX, RALPH
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	D
Name	HOWARD, RANDY
Address	909 POYDRAS ST, STE. 1700
City-State-Zip:	NEW ORLEANS LA 70112

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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: R LEIGH BARKER

CAO

02/10/2022

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