# 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001450

Entity Name: REGIONS BANK

#### **Current Principal Place of Business:**

1900 FIFTH AVENUE NORTH BIRMINGHAM, AL 35203

### **Current Mailing Address:**

1900 FIFTH AVENUE NORTH BIRMINGHAM, AL 35203

## FEI Number: 63-0371391

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

Date

Certificate of Status Desired: No

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

### **Officer/Director Detail :**

Title	ASST. SECRETARY	Title	DIRECTOR, PRESIDENT
Name	WELCH, PAMELA R	Name	HALL, JR., O. B. GRAYSON
Address City-State-Zip:	315 DEADRICK STREET 5TH FLOOR NASHVILLE TN 37237	Address City-State-Zip:	1900 FIFTH AVENUE NORTH BIRMINGHAM AL 35203
Title Name Address City-State-Zip:	CFO TURNER, JR., DAVID J 1900 FIFTH AVENUE NORTH BIRMINGHAM AL 35203	Title Name Address City-State-Zip:	SECRETARY GALE III, FOURNIER J 1900 FIFTH AVENUE NORTH BIRMINGHAM AL 35203
Title Name Address City-State-Zip:	DIRECTOR MCCRARY, CHARLES D 1900 FIFTH AVENUE NORTH BIRMINGHAM AL 35203	Title Name Address City-State-Zip:	DIRECTOR DEFOSSET, DON 1900 FIFTH AVENUE NORTH BIRMINGHAM AL 35203
Title Name Address City-State-Zip:	DIRECTOR STYSLINGER III, LEE J 1900 FIFTH AVENUE NORTH BIRMINGHAM AL 35203	Title Name Address City-State-Zip:	DIRECTOR BYRD, CAROLYN H 1900 FIFTH AVENUE NORTH BIRMINGHAM AL 35203
		Continues of	on page 2

v 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 n

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: PAMELA R. WELCH

ASSISTANT SECRETARY 04/14/2017

Electronic Signature of Signing Officer/Director Detail

# **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR
Name	FAST, ERIC C	Name	MATLOCK, SUSAN W
Address	1900 FIFTH AVENUE NORTH	Address	1900 FIFTH AVENUE NORTH
City-State-Zip:	BIRMINGHAM AL 35203	City-State-Zip:	BIRMINGHAM AL 35203
Title	DIRECTOR	Title	DIRECTOR
Name	MARSHALL, RUTH ANN	Name	JOHNS, JOHN D
Address	1900 FIFTH AVENUE NORTH	Address	1900 FIFTH AVENUE NORTH
City-State-Zip:	BIRMINGHAM AL 35203	City-State-Zip:	BIRMINGHAM AL 35203
Title	DIRECTOR	Title	DIRECTOR
Title Name	DIRECTOR COOPER, DAVID J	Title Name	DIRECTOR MAUPIN, JR., JOHN E
Name	COOPER, DAVID J 1900 FIFTH AVENUE NORTH	Name	MAUPIN, JR., JOHN E
Name Address City-State-Zip: Title	COOPER, DAVID J 1900 FIFTH AVENUE NORTH BIRMINGHAM AL 35203 DIRECTOR	Name Address City-State-Zip: Title	MAUPIN, JR., JOHN E 1900 FIFTH AVENUE NORTH BIRMINGHAM AL 35203 DIRECTOR
Name Address City-State-Zip:	COOPER, DAVID J 1900 FIFTH AVENUE NORTH BIRMINGHAM AL 35203	Name Address City-State-Zip:	MAUPIN, JR., JOHN E 1900 FIFTH AVENUE NORTH BIRMINGHAM AL 35203