### **2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000003199

Entity Name: HANCOCK WHITNEY INVESTMENT SERVICES, INC.

**FILED** Apr 29, 2021 Secretary of State 4384206182CC

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

2510 14TH STREET GULFPORT, MS 39501

## **Current Mailing Address:**

ATTN: KYNA N. SMITH

701 POYDRAS STREET SUITE 3000 NEW ORLEANS, LA 70139 US

FEI Number: 64-0867168 Certificate of Status Desired: No.

### Name and Address of Current Registered Agent:

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

City-State-Zip:

Title

Address

Officer/Director Detail:

CORPORATE TAX OFFICER Title Title **EVP** 

Electronic Signature of Registered Agent

LEW, BONNIE MILTON, MILES Name Name

Address 701 POYDRAS STREET Address 2510 14TH STREET ATTN: LEGAL DEPT

**SUITE 1500** 

NEW ORLEANS LA 70139 **GULFPORT MS 39501** City-State-Zip:

Title VP, CFO, ASST. SECRETARY, Title PRESIDENT, CEO, DIRECTOR

TREASURER Name FUJINAGA. JAMES H.

DEBLANC, RONALD Name

701 POYDRAS STREET Address 701 POYDRAS STREET Address **SUITE 3100** 

ATTN: LEGAL DEPARTMENT SUITE NEW ORLEANS LA 70139

City-State-Zip:

NEW ORLEANS LA 70139 City-State-Zip: Title OTHER

Name NICHOALDS, STUART Title ٧P

Address 701 POYDRAS STREET LEBLANC, KEITH Name

ATTN: LEGAL DEPT SUITE 3000

Address 701 POYDRAS STREET NEW ORLEANS LA 70139 City-State-Zip: ATTN: LEGAL DEPT SUITE 3000

City-State-Zip: NEW ORLEANS LA 70139 Title SENIOR ASSISTANT CORPORATE

**SECRETARY** VP, CHIEF COMPLIANCE OFFICER,

Name LOUPE, PATRICIA K SECRETARY, DIRECTOR

COGNEVICH, ANTHONY Address 701 POYDRAS STREET Name

**SUITE 3400** 701 POYDRAS STREET

NEW ORLEANS LA 70139 City-State-Zip: **SUITE 3100** 

NEW ORLEANS LA 70139 City-State-Zip:

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.

04/29/2021 SIGNATURE: KYNA SMITH ASST SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

Date

# Officer/Director Detail Continued:

Title SENIOR ASSISTANT CORPORATE SECRETARY

Name SMITH, KYNA N

Address 701 POYDRAS STREET

SUITE 3000

City-State-Zip: NEW ORLEANS LA 70139