#### 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000066682

Entity Name: HANCOCK INVESTMENT SERVICES OF FLORIDA, INC.

FILED
Apr 21, 2016
Secretary of State
CC7997517165

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

2600 CITIPLACE DRIVE SUITE 100

BATON ROUGE, LA 70808

### **Current Mailing Address:**

228 ST. CHARLES AVENUE, SUITE626 ATTN: TERESA LYGATE

NEW ORLEANS, LA 70130 US

FEI Number: 20-1004110 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:

Electronic Signature of Registered Agent Date

City-State-Zip:

Officer/Director Detail:

Title DIRECTOR, CHAIRMAN Title VP

Name LOPER, D. SHANE Name SIMMONS, MIKE

Address 2510 14TH STREET Address 2600 CITIPLACE DRIVE

SUITE 100

City-State-Zip: GULFPORT MS 39501

City-State-Zip: BATON ROUGE LA 70808

Title VP

Name PALOZZOLA, DAVID J.

Title ASST. SECRETARY

Name LYGATE, TERESA Z

Address 228 ST. CHARLES AVENUE Address 228 ST. CHARLES AVENUE

City-State-Zip: NEW ORLEANS LA 70130 SUITE 626

Title CORPORATE TAX OFFICER

Name LESTELLE, ELIZABETH M Title DIRECTOR

Address 228 ST. CHARLES AVENUE Name ACHARY, MICHAEL M.

City-State-Zip: NEW ORLEANS LA 70130 Address 228 ST. CHARLES AVENUE

EXECUTIVE OFFICES

NEW ORLEANS LA 70130

Title DIRECTOR City-State-Zip: NEW ORLEANS LA 70130

Name EXNICIOS, JOSEPH S. Title PRESIDENT, CEO
Address 228 ST. CHARLES AVENUE

EXECUTIVE OFFICES

Name MILTON, MILES

City-State-Zip: NEW ORLEANS LA 70130 Address 228 ST. CHARLES AVENUE, SUITE 626

City-State-Zip: NEW ORLEANS LA 70130

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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: TERESA Z. LYGATE ASSISTANT SECRETARY 04/21/2016

# Officer/Director Detail Continued:

Title VP, TREASURER, CFO, ASST. SECRETARY Title SECRETARY

Name DEBLANC, RONALD Name PHILLIPS, JOY LAMBERT

Address 228 ST. CHARLES AVENUE, SUITE 626 Address 2510 14TH STREET

City-State-Zip: NEW ORLEANS LA 70130

City-State-Zip: GULFPORT MS 39501