2002 UNIFORM BUSINESS REPORT (UBR)

Entity Name: BANK OF AMERICA CORPORATION

Current Principal Place of Business:  
401 N TRYLON ST  
NC1-021-02-20  
CHARLOTTE, NC 28255

New Principal Place of Business:  
100 N TRYLON ST  
CHARLOTTE, NC 28255

Current Mailing Address:  
401 N TRYLON ST  
NC1-021-02-20  
CHARLOTTE, NC 28255

New Mailing Address:  

FEI Number: 56-0906609  

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

This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CB  
Name: MCCOLL JR, HUGH L  
Address: 401 N TRYLON ST NC1-021-02-20  
City-7Zip: CHARLOTTE, NC 28255

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D  
Name: LEWIS, KENNETH D  
Address: 401 N TRYLON ST NC1-021-02-20  
City-7Zip: CHARLOTTE, NC 28255

Title: PD  
Name: LEWIS, KENNETH D  
Address: 401 N TRYLON ST NC1-021-02-20  
City-7Zip: CHARLOTTE, NC 28255

Title: DIR  
Name: BELK, JOHN R  
Address: 401 N TRYLON ST NC1-021-02-20  
City-7Zip: CHARLOTTE, NC 28255

Title: SVP  
Name: MROZ, GREG S  
Address: 401 N TRYLON ST NC1-021-02-20  
City-7Zip: CHARLOTTE, NC 28255

Title: SEC  
Name: GILLIAM, ALLISON  
Address: 401 N TRYLON ST NC1-021-02-20  
City-7Zip: CHARLOTTE, NC 28255

Title: TREA  
Name: HANCE, JR, JAMES H  
Address: 401 N TRYLON ST NC1-021-02-20  
City-7Zip: CHARLOTTE, NC 28255

Title: D  
Name: SPANGLER, MEREDITH R  
Address: 401 N TRYLON ST NC1-021-02-20  
City-7Zip: CHARLOTTE, NC 28255

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GREG S MROZ  
Electronic Signature of Signing Officer or Director  
SVP  
Date 04/24/2002