CURRENT PRINCIPAL PLACE OF BUSINESS:
100 N TRYON ST
CHARLOTTE, NC 28255

NEW PRINCIPAL PLACE OF BUSINESS:

CURRENT MAILING ADDRESS:
401 N TRYON ST
NC1-021-02-20
CHARLOTTE, NC 28255

NEW MAILING ADDRESS:

FEI NUMBER: 56-0906609
FEI NUMBER APPLIED FOR ( )
FEI NUMBER NOT APPLICABLE ( )
CERTIFICATE OF STATUS DESIRED ( )

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

ELECTION CAMPAIGN FINANCING TRUST FUND CONTRIBUTION ( ).

OFFICERS AND DIRECTORS:

Title: P/D
Name: MOYNIHAN, BRIAN T
Address: 401 N TRYON ST NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

Title: SVP
Name: MCNAIRY, WILLIAM L
Address: 401 N TRYON ST NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

Title: SEC
Name: HEARLD, ALICE A
Address: 401 N TRYON ST NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

Title: CFO
Name: PRICE, JOE L III
Address: 401 N TRYON ST NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

Title: D
Name: BIES, SUSAN S III
Address: 401 N TRYON ST NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

Title: D
Name: SCULLY, TOBERT W
Address: 401 N TRYON ST NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

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: WILLIAM L. MCNAIRY

SVP

Date: 01/07/2010