

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M99000001595

FILED  
Apr 24, 2002 8:00 AM  
Secretary of State

Entity Name: BANC OF AMERICA FACILITIES LEASING, LLC

## Current Principal Place of Business:

NC1-021-02-20  
401 N TRYON ST  
CHARLOTTE, NC 28255

## New Principal Place of Business:

555 CALIFORNIA ST  
SAN FRANCISCO, CA 94104

## Current Mailing Address:

NC1-021-02-20  
401 N TRYON ST  
CHARLOTTE, NC 28255

## New Mailing Address:

401 N TRYON ST  
NC1-021-02-20  
CHARLOTTE, NC 28255

FEI Number: 52-2188006

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

## Name and Address of New Registered Agent:

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

## MANAGING MEMBERS/MEMBERS:

Title: P ( ) Delete  
Name: HARRIS, RICHARD V  
Address: 401 N TRYON ST  
City-St-Zip: CHARLOTTE, NC 28255

Title: V (X) Delete  
Name: MROZ, GREG S  
Address: 401 N TRYON ST  
City-St-Zip: CHARLOTTE, NC 28255

Title: S (X) Delete  
Name: STARK, EDWARD J  
Address: 401 N TRYON ST  
City-St-Zip: CHARLOTTE, NC 28255

Title: T (X) Delete  
Name: HURD, RODNEY W  
Address: 401 N TRYON ST  
City-St-Zip: CHARLOTTE, NC 28255

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: SECURITY PACIFIC LEA, SING CORPORATI O N  
Address: 401 N TRYON ST NC1-021-02-20  
City-St-Zip: CHARLOTTE, NC 28255

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GREG S MROZ

SVP

04/24/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date