

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 850178

FILED
Jan 07, 2010
Secretary of State

Entity Name: NATIONSBANC INSURANCE COMPANY, INC.

Current Principal Place of Business:

101 S TRYON ST
CHARLOTTE, NC 28255 US

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 57-0345444 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D
Name: PELLERIN, J KEITH
Address: 401 N TRYON ST NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255 US

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

Title: SEC
Name: COSTAMAGNA, CHRISTINE M
Address: 401 N TRYON ST NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255 US

Title: D/T
Name: WILLIAMS, LEWIS E
Address: 401 N TRYON ST NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255 US

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

01/07/2010

Electronic Signature of Signing Officer or Director

Date