

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F01000002368

FILED
Sep 19, 2006
Secretary of State

Entity Name: BRANCH BANKING AND TRUST COMPANY

Current Principal Place of Business:

200 W SECOND STREET
WINSTON SALEM, NC 27101

New Principal Place of Business:

200 W SECOND STREET
3RD FLOOR
WINSTON SALEM, NC 27101

Current Mailing Address:

CORPORATE SECRETARY
200 WEST SECOND AVENUE
WINSTON-SALEM, NC 27101

New Mailing Address:

CORPORATE SECRETARY
200 WEST SECOND STREET, 3RD FL
WINSTON-SALEM, NC 27101

FEI Number: 56-1074313

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: DALE MORRIS

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: ALLISON, JOHN A IV
Address: 200 W SECOND STREET
City-St-Zip: WINSTON SALEM, NC 27101

Title: D () Delete
Name: ARNOLD, PHYLLIS H
Address: 200 W SECOND STREET
City-St-Zip: WINSTON SALEM, NC 27101

Title: PD () Delete
Name: GREENE, ROBERT E
Address: 200 W SECOND STREET
City-St-Zip: WINSTON SALEM, NC 27101

Title: D () Delete
Name: CARTER, W E
Address: 200 W SECOND STREET
City-St-Zip: WINSTON SALEM, NC 27101

Title: VD () Delete
Name: KING, KELLY S
Address: 200 W SECOND STREET
City-St-Zip: WINSTON SALEM, NC 27101

Title: V () Delete
Name: WILSON, C. LEON
Address: 200 W SECOND STREET
City-St-Zip: WINSTON SALEM, NC 27101

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: CFO (X) Change () Addition
Name: HENSON, CHRISTOPHER L
Address: 200 W SECOND STREET
City-St-Zip: WINSTON SALEM, NC 27101

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LISA I MOBERLY

Electronic Signature of Signing Officer or Director

OTH

09/19/2006

Date