2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002368

Entity Name: BRANCH BANKING AND TRUST COMPANY

FILED Apr 02, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

200 WEST 2ND STREET
WINSTON - SALEM, NC 27101
200 WEST 2ND STREET
WINSTON-SALEM, NC 27101
WINSTON-SALEM, NC 27101

Current Mailing Address: New Mailing Address:

200 WEST 2ND STREET

WINSTON-SALEM, NC 27101

C/O LISA I. MOBERLY BB&T

200 WEST SECOND STREET 3RD FLOOR LEGAL

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: Name and Address of New 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.

iii tile State of Florid

SIGNATURE: Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES

 Name:
 GREENE, ROBERT E PRES

 Address:
 200 WEST 2ND STREET

 City-St-Zip:
 WINSTON-SALEM, NC 27101

Title: SEC

 Name:
 JONES, FRANCES B SEC

 Address:
 200 WEST 2ND STREET

 City-St-Zip:
 WINSTON-SALEM, NC 27101

Title: CFO

 Name:
 BIBLE, DARYL N CFO

 Address:
 200 WEST 2ND STREET

 City-St-Zip:
 WINSTON-SALEM, NC 27101

Title: DIR

Name: BRUMLEY, THOMAS R DIR Address: 200 WEST 2ND STREET

City-St-Zip: WINSTON-SALEM, NC 27101

Title: DIR

 Name:
 FAULKNER, JAMES A DIR

 Address:
 200 WEST 2ND STREET

 City-St-Zip:
 WINSTON - SALEM, NC 27101

Title: DIR

 Name:
 FAULKNER, JAMES A DIR

 Address:
 200 WEST 2ND STREET

 City-St-Zip:
 WINSTON - SALEM, NC 27101

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: MANDELINE HENDRICKS POA 04/02/2010