

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001411

Entity Name: CAPITALSOUTH BANK

FILED  
Mar 26, 2009  
Secretary of State

## Current Principal Place of Business:

2340 WOODCREST PLACE, SUITE 200  
BIRMINGHAM, AL 35209

## New Principal Place of Business:

2340 WOODCREST PLACE  
BIRMINGHAM, AL 35209

## Current Mailing Address:

2340 WOODCREST PLACE, SUITE 200  
BIRMINGHAM, AL 35209

## New Mailing Address:

2340 WOODCREST PLACE  
BIRMINGHAM, AL 35209

FEI Number: 63-0698178

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PUCKETT, W. DAN  
Address: 2340 WOODCREST PLACE, SUITE 200  
City-St-Zip: BIRMINGHAM, AL 35209

Title: S ( ) Delete  
Name: MARSH, CAROL W  
Address: 2340 WOODCREST PLACE, SUITE 200  
City-St-Zip: BIRMINGHAM, AL 35209

Title: D ( ) Delete  
Name: GRAVES, STANLEY L  
Address: 6930 CAHABA VALLEY ROAD, SUITE 200  
City-St-Zip: BIRMINGHAM, AL 35242

Title: D ( ) Delete  
Name: WOOD, DAVE W II  
Address: P.O. BOX 610130  
City-St-Zip: BIRMINGHAM, AL 35210

Title: D ( ) Delete  
Name: DUNN, HAROLD B.  
Address: P.O. BOX 100759  
City-St-Zip: BIRMINGHAM, AL 35210

Title: D (X) Delete  
Name: MCPHERSON, CHARLES K  
Address: 5150 CARDINAL STREET  
City-St-Zip: TRUSSVILLE, AL 35173

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

I hereby certify that the information supplied with this filing does not qualify 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: DAVID D. DUNCAN

VP

03/26/2009

Electronic Signature of Signing Officer or Director

Date