2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000396

Entity Name: REGIONS FINANCIAL LEASING, INC.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
417 N 20TH ST MONTGOMERY, AL 361021203				60 COMMERCE STREET MONTGOMERY, AL 361021203				
Current Mailing Address:				New Mailing Address:				
P O BOX 10247 ATTN: RACHEL CADDELL BIRMINGHAM, AL 35202 US			P O BOX 10247 ATTN: RACHEL CADDELL BIRMINGHAM, AL 35203 US					
FEI Number:	63-1059813	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate	e of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:		Name and	Address of I	New Regi	stered Agent:	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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.								
SIGNATUR								
SIGNATOR		Signature of Registered Agent	t				Date	
Election Cam		Frust Fund Contribution ().						
OFFICERS	AND DIRECT	ORS:		ADDITION	S/CHANGES	TO OFFI	CERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () C HORSLEY, RICH, 417 N 20TH STRI BIRMINGHAM, AL	EET		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	DAS () C UPCHURCH, SAM 417 N 20TH STRI BIRMINGHAM, AL	EET		Title: Name: Address: City-St-Zip:	DS (X UPCHURCH, S 417 N 20TH ST BIRMINGHAM,	TREET) Addition	
Title: Name: Address: City-St-Zip:	V () E GRUBBS, CHRIS 417 N 20TH STRI BIRMINGHAM, AL	EET		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	PD () D MIMS, RICKY 60 COMMERCE MONTGOMERY,	STREET		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	D () D JORDAN, D BRYA 417 N 20TH STRI BIRMINGHAM, AL	EET		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	V (X) E STONE, E. CRIS 417 N 20TH STRI BIRMINGHAM, AL			Title: Name: Address: City-St-Zip:	() Change() Addition	

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.

	Flacture is Oissanting of Oissanting Office and Discrete		
SIGNATURE:	D BRYAN JORDAN	D	04/27/2006