

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91435 048 \*\*\*150.00

**DOCUMENT # F92000000396**

1. Entity Name  
**REGIONS FINANCIAL LEASING, INC.**



Principal Place of Business  
P.O. BOX 1203  
MONTGOMERY, AL 36102-1203

Mailing Address  
P O BOX 10247  
ATTN: JACKIE SNOW  
BIRMINGHAM, AL 35202 US

2. Principal Place of Business

3. Mailing Address  
P. O. Box 10247

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
Attn: Rachel Caddell

City & State

City & State  
Birmingham, AL

Zip

Country

Zip  
35202

Country  
USA

4. FEI Number  
63-1059813

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~C-T CORPORATION SYSTEM~~  
C/O C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when reinstating.)

DATE

**FILE NOW!!! FEE IS \$150.00**  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
D  
HORSLEY, RICHARD  
STREET ADDRESS  
417 N 20TH STREET  
CITY-ST-ZIP  
BIRMINGHAM, AL 36203 ☐ Delete

TITLE  
NAME  
V  
E.C. (Cris) Stone  
STREET ADDRESS  
417 N. 20th Street  
CITY-ST-ZIP  
Birmingham, AL 35203 ☐ Change ☒ Addition

TITLE  
NAME  
S  
JOHNSON, DEREK  
STREET ADDRESS  
417 N 20TH STREET  
CITY-ST-ZIP  
BIRMINGHAM, AL 36203 ☐ Delete

TITLE  
NAME  
D/AS  
Upchurch, Sam  
STREET ADDRESS  
417 N. 20th Street  
CITY-ST-ZIP  
Birmingham, AL 35203 ☒ Change ☐ Addition

TITLE  
NAME  
V  
GRUBBS, CHRISTOPHER  
STREET ADDRESS  
417 N 20TH STREET  
CITY-ST-ZIP  
BIRMINGHAM, AL 36203 ☐ Delete

TITLE  
NAME  
T  
Haas, Eric  
STREET ADDRESS  
417 N. 20th Street  
CITY-ST-ZIP  
Birmingham, AL 35203 ☐ Change ☒ Addition

TITLE  
NAME  
PD  
MIMS, RICKY  
STREET ADDRESS  
6720 GREENBROOK DR  
CITY-ST-ZIP  
MONTGOMERY, AL 36117 ☐ Delete

TITLE  
NAME  
PD  
Ricky Mims  
STREET ADDRESS  
60 Commerce Street  
CITY-ST-ZIP  
Montgomery, AL 36104 ☒ Change ☐ Addition

TITLE  
NAME  
D  
JORDAN, D BRYAN  
STREET ADDRESS  
417 N 20TH STREET  
CITY-ST-ZIP  
BIRMINGHAM, AL 35203 ☐ Delete

TITLE  
NAME  
  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
D  
UPCHURCH, SAM  
STREET ADDRESS  
417 N 20TH STREET  
CITY-ST-ZIP  
BIRMINGHAM, AL 35203 ☐ Delete

TITLE  
NAME  
  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

5-1-03 (205) 458-7675