


FILED
Jul 17, 2006 8:00 am
Secretary of State

07-17-2006 90144 029 ***550.00

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # F97000003160	
1. Entity Name AMSOUTH BANK	

Principal Place of Business AMSOUTH SONAT TOWER 1900 5TH AVENUE NORTH BIRMINGHAM, AL 35203	Mailing Address LAW DEPARTMENT 1900 5TH AVENUE NORTH, 10 FLOOR BIRMINGHAM, AL 35203
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DO NOT WRITE IN THIS SPACE

07052006 No Chg-P CR2E034 (11/05)

4. FEI Number 63-0935103	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

**DO NOT WRITE
 IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$550.00
 Due by September 6, 2006**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD RITTER, C. DOWD 1900 5TH AVENUE NORTH BIRMINGHAM, AL 35203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEAVENPORT, EARNEST PO BOX 431 KINGSPORT, TN 37662
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D INGRAM, MARTHA 4400 HARDING RD NASHVILLE, TN 7205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS GORDAY, CARL L 1900 FIFTH AVENUE NORTH, 10TH FLOOR BIRMINGHAM, AL 35203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BUCHANAN, JOHN D 1900 FIFTH AVENUE NORTH, 10TH FLOOR BIRMINGHAM, AL 35203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Carl L. Gorday Carl L. Gorday 7-6-06 205-326-5183
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #