

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 16 1998 8:00 am
Secretary of State

DOCUMENT # F97000003673 (7)

1. Corporation Name
SOUTHTRUST OF ALABAMA, INC.



Principal Place of Business

Mailing Address

420 NORTH 20TH ST.
BIRMINGHAM AL 35203

420 NORTH 20TH ST.
BIRMINGHAM AL 35203

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/15/1997	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 72-1375547	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUGHES, CHARLES E JR
1301 RIVER PLACE BLVD., SUITE 400
JACKSONVILLE FL 32207

81	Name Roger G. Clarke
82	Street Address (P.O. Box Number is Not Acceptable) 1301 River Place Blvd., Suite 400
83	
84	City Jacksonville
85	Zip Code FL 32207

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Roger G. Clarke
Signature, typed name and home of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

March 7, 1998

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURRAY, FREDERICK W JR.	1.2 NAME	
STREET ADDRESS	420 NORTH 20TH ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL 35203	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAINER, JAMES W JR.	2.2 NAME	
STREET ADDRESS	420 NORTH 20TH ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL 35203	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOTHER, ALTON E	3.2 NAME	
STREET ADDRESS	420 NORTH 20TH ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL 35203	3.4 CITY-ST-ZIP	
TITLE	SD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARNARD, AUBREY D	4.2 NAME	
STREET ADDRESS	420 NORTH 20TH ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL 35203	4.4 CITY-ST-ZIP	
TITLE	ASD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRATER, WILLIAM L	5.2 NAME	
STREET ADDRESS	420 NORTH 20TH ST.	5.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL 35203	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

W. L. Prater

3/11/98

CR2E034 (10/97)