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Sep 21, 1999 8:00 am
Secretary of State

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**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000003673

1. Corporation Name

SOUTHTRUST OF ALABAMA, INC.



Principal Place of Business

**420 NORTH 20TH ST.
BIRMINGHAM AL 35203**

Mailing Address

**420 NORTH 20TH ST.
BIRMINGHAM AL 35203**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/15/1997

4. FEI Number

72-1375547

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property. ☒ Yes ☐ No

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address **Attn: Brian Lassiter**

Suite, Apt. #, etc. **Tax Dept**

City & State **PO Box 2554**

Zip **Birmingham, AL**

Country **35290**

U.S.

9. Name and Address of Current Registered Agent

**CLARKE, ROGER G
1301 RIVER PLACE BLVD., SUITE 400
JACKSONVILLE FL 32207**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE
NAME **PD**
STREET ADDRESS **MURRAY, FREDERICK W JR.**
CITY-ST-ZIP **420 NORTH 20TH ST.
BIRMINGHAM AL 35203**

TITLE ☐ DELETE
NAME **VD**
STREET ADDRESS **RAINER, JAMES W JR.**
CITY-ST-ZIP **420 NORTH 20TH ST.
BIRMINGHAM AL 35203**

TITLE ☐ DELETE
NAME **VD**
STREET ADDRESS **YOTHER, ALTON E**
CITY-ST-ZIP **420 NORTH 20TH ST.
BIRMINGHAM AL 35203**

TITLE ☒ DELETE
NAME **SD**
STREET ADDRESS **BARNARD, AUBREY D**
CITY-ST-ZIP **420 NORTH 20TH ST.
BIRMINGHAM AL 35203**

TITLE ☐ DELETE
NAME **ASD**
STREET ADDRESS **PRATER, WILLIAM L**
CITY-ST-ZIP **420 NORTH 20TH ST.
BIRMINGHAM AL 35203**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Director** Change ☒ Addition
1.2 NAME **William Patterson**
1.3 STREET ADDRESS **420 North 20th Street**
1.4 CITY-ST-ZIP **Birmingham, AL 35203**

2.1 TITLE **President, Chairman, Director** Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE **Director, Secretary, Treasurer** Change ☒ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE **Vice President** Change ☒ Addition
4.2 NAME **Paul Gaurley**
4.3 STREET ADDRESS **100 Brookwood Place Suite 300**
4.4 CITY-ST-ZIP **Birmingham, AL 35209**

5.1 TITLE **Director, Assistant Secretary, Assistant Treasurer** Change ☒ Addition
5.2 NAME
5.3 STREET ADDRESS **100 Brookwood Place Suite 300**
5.4 CITY-ST-ZIP **Birmingham, AL 35209**

6.1 TITLE **Vice President** Change ☐ Addition
6.2 NAME **Paula Berry**
6.3 STREET ADDRESS **100 Brookwood Place Suite 300**
6.4 CITY-ST-ZIP **Birmingham, AL 35209**

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:

REQUIRED

Date

Daytime Phone #

9/15/99 (205)2544007

CR2E034 (5/99)