## 2000 UNIFORM BUSINESS REPORT (UBR)

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## **FILED** DOCUMENT # F9700003673 Sep 18, 2000 8:00 am 1. Entity Name **Secretary of State** SOUTHTRUST OF ALABAMA, INC. 09-18-2000 90148 045 \*\*\*550.00 Principal Place of Business Mailing Address 420 NORTH 20TH ST. PO BOX 2554 BIRMINGHAM AL 35203 BIRMINGHAM AL 35290 3. Mailing Address Att Shell 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 72-1375547 Not Applicable \_Country\_\_\_ \_Country \_\_\_\_ \$8.75. Additional~ 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CLARKE, ROGER G Street Address (P.O. Box Number is Not Acceptable) 1301 RIVER PLACE BLVD., SUITE 400 JACKSONVILLE FL 32207 Zip Code FL 8. The above hamed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. D ☐ Addition TIT! F ☐ Delete TITLE PATTERSON, WILLIAM NAME NAMÉ STREET ADDRESS 420 NORTH 20TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **BIRMINGHAM AL 35203** ☐ Change Addition TITLE ☐ Delete TITLE YOTHER, ALTON E NAME NAME STREET ADDRESS STREET ADDRESS 420 NORTH 20TH ST. CITY-ST-ZIP --CITY-ST-ZIP-BIRMINGHAM-AL-35203~ ☐ Change Addition TITLE Delete TITLE GARLEY, PAUL NAME NAME 100 BROOKWOOD PLACE STE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE **BIRMINGHAM AL 35203** ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME PRATER, WILLIAM L NAME STREET ADDRESS 420 NORTH 20TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **BIRMINGHAM AL 35203** Change ☐ Addition TITLE Delete TITLE BERRY, PAULA STREET ADDRESS 100 BROOKWOOD PLACE STE 300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BIRMINGHAM AL 35209** Delete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if