

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000061

FILED
Apr 29, 2007
Secretary of State

Entity Name: BANC OF AMERICA SECURITIES LLC

Current Principal Place of Business:

100 N TRYON ST
NC1-007-20-01
CHARLOTTE, NC 28255

New Principal Place of Business:

Current Mailing Address:

401 N TRYON ST
NC1-021-02-20
CHARLOTTE, NC 28255

New Mailing Address:

FEI Number: 56-2058405

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MEMB () Delete
Name: NATIONSBANC MONTGOME, RY HOLDINGS CO R PORATIO
Address: 401 N TRYON STREET NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

Title: MGR () Delete
Name: BERKERY, THOMAS
Address: 401 N TRYON ST; NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

Title: MGR () Delete
Name: BRILLE, BRIAN J
Address: 401 N TRYON ST; NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

Title: MGR () Delete
Name: WERNER, MARK
Address: 401 N TRYON ST; NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

Title: MGR () Delete
Name: WILLIAMS, CHARLES
Address: 401 N TRYON ST; NC1-021-02-20
City-St-Zip: CHARLOTTE, NC 28255

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DESOUZA QUERO

SVP

04/29/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date