

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146126

FILED
Jan 08, 2007
Secretary of State

Entity Name: SOUTHTRUST LENDING CORP

Current Principal Place of Business:

3800 INVERRARY BLVD.
STE. 100H
LAUDERHILL, FL 33319

New Principal Place of Business:

Current Mailing Address:

3800 INVERRARY BLVD.
STE. 100H
LAUDERHILL, FL 33319

New Mailing Address:

FEI Number: 20-3707365 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, EVERLINE
3280 SPANISH MOSS TERRACE
1-410
LAUDERHILL, FL 33319 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, EVERLINE
Address: 3280 SPANISH MOSS TERRACE 1-410
City-St-Zip: LAUDERHILL, FL 33319

Title: VP () Delete
Name: ATKINS, MARJORIE
Address: 9300 NW 24TH STREET
City-St-Zip: SUNRISE, FL 33322

Title: D () Delete
Name: MILLER, JANET
Address: 10875 NW 29TH MANOR #3
City-St-Zip: SUNRISE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: CALIXTE, LINDA
Address: 6349 WILLOUGHBY CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EJONES

P

01/08/2007

Electronic Signature of Signing Officer or Director

_____ Date