

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000146126

Entity Name: SOUTHTRUST LENDING CORP

**FILED**  
**Jun 04, 2007**  
**Secretary of State**

## **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

## **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: S (X) Delete  
Name: CALIXTE, LINDA  
Address: 6349 WILLOUGHBY CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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

06/04/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date