2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAM

DOCUMENT # P16524 Jun 13, 2000 8:00 am 1. Entity Name Secretary of State AMSOUTH INVESTMENT SERVICES, INC. 06-13-2000 90006 045 ***550.00 Principal Place of Business Mailing Address 250 RIVERCHASE PKWY E BIRMINGHAM AL 35283 4TH FLOOR HOOVER AL 35244 ** 11 *** ** [18] [] [] \$ 11 *** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 63-0885514 Not Applicable Zip -Country -- -- --- Zip--------...Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name KYTE, BARRY JAY, SR. Street Address (P.O. Box Number is Not Acceptable) 70 NORTH BAYLEN STREET PENSACOLA FL 32501 Zip Code City 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax fring requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITI F CDPC ☐ Delete TITLE ☐ Addition NAME ZECHER, NOAH NAME STREET ADDRESS STREET ADDRESS 250 RIVERCHASE PKWY E CITY-ST-ZIP CITY-ST-ZIP **HOOVER AL 35244** ☐ Change ☐ Addition Delete TITLE TITLE GIBSON, SLOAN D IV NAME NAME STREET ADDRESS 1901 - 6TH AVE., N. STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM.AL** CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE ROGERS, CANDICE NAME NAME STREET ADDRESS 1901 - 6TH AVE., N. STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL** CITY-ST-ZIP ☐ Addition Delete TITLE Change BAKER, MICHEAL NAME NAME STREET ADDRESS STREET ADDRESS 1901 - 6TH AVE., N. CITY-ST-ZIP CITY-ST-ZIP **BIRMINGTON AL** CFO Delete Change ☐ Addition NAME GUERIN, JOAN NAME STREET ADDRESS 250 RIVERCHASE PKWY E STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **HOOVER AL 35244** ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 changed, or on an attachment with an address, with all other like empowered.

OFFICER OR DIRECTOR