

2000 UNIFORM BUSINESS REPORT (UBR)

0546350

DOCUMENT # P20018

1. Entity Name

SOUTHTRUST SECURITIES, INC.

FILED

00 FEB -7 AM 9:38

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

Principal Place of Business
112 N. 20TH STREET
7TH FLOOR
BIRMINGHAM AL 35203

Mailing Address
112 N. 20TH STREET
7TH FLOOR
BIRMINGHAM AL 35203-3604

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **63-0913711**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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
Tax filing requirement and elects to do so.
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **HUDGINS, JAMES D.**
STREET ADDRESS **112 N. 20TH STREET**
CITY-ST-ZIP **BIRMINGHAM AL**

TITLE ☐ Change ☐ Addition
NAME **D**
STREET ADDRESS **William Patterson**
CITY-ST-ZIP **420 N 20th Street**

TITLE **D** ☒ Delete
NAME **BASS, DANIEL L**
STREET ADDRESS **112 N 20TH STREET 7TH FLOOR**
CITY-ST-ZIP **BIRMINGHAM AL**

TITLE ☐ Change ☒ Addition
NAME **William Patterson**
STREET ADDRESS **420 N 20th Street**
CITY-ST-ZIP **Birmingham, AL**

TITLE **D** ☐ Delete
NAME **WHITE, RICHARD S**
STREET ADDRESS **420 N 20TH ST**
CITY-ST-ZIP **BIRMINGHAM AL**

TITLE ☐ Change ☐ Addition
NAME **800003136618-2**
STREET ADDRESS **-02/15/00--01122--010**
CITY-ST-ZIP ******150.00 ****150.00**

TITLE **D** ☒ Delete
NAME **RAINER, JAMES W**
STREET ADDRESS **420 N 20TH ST**
CITY-ST-ZIP **BIRMINGHAM AL**

TITLE ☐ Change ☐ Addition
NAME **D**
STREET ADDRESS **Jim Nonnengard**
CITY-ST-ZIP **112 N 20th Street**

TITLE **D** ☐ Delete
NAME **BENNETT, MORRIS**
STREET ADDRESS **112 N 20TH ST**
CITY-ST-ZIP **BIRMINGHAM AL**

TITLE ☐ Change ☐ Addition
NAME **Birmingham, AL**
STREET ADDRESS
CITY-ST-ZIP

TITLE **CEOD** ☐ Delete
NAME **PORTER, JOHN D.**
STREET ADDRESS **112 N 20TH ST., 7TH FLOOR**
CITY-ST-ZIP **BIRMINGHAM AL**

TITLE ☐ Change ☐ Addition
NAME **SP**
STREET ADDRESS
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/4/00 205 254-5373

CR2E034 (9/99)