

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P20018

1. Entity Name

SOUTHTRUST SECURITIES, INC.

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90006 015 ***150.00

Principal Place of Business

112 N. 20TH STREET
7TH FLOOR
BIRMINGHAM AL 35203

Mailing Address

112 N. 20TH STREET
7TH FLOOR
BIRMINGHAM AL 35203

004486



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 63-0913711

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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, 2001 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

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HUDGINS, JAMES D.	
STREET ADDRESS	112 N. 20TH STREET	
CITY-ST-ZIP	BIRMINGHAM AL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PATTERSON, WILLIAM	
STREET ADDRESS	420 N. 20TH STREET	
CITY-ST-ZIP	BIRMINGHAM AL	
TITLE	D	<input type="checkbox"/> Delete
NAME	WHITE, RICHARD S	
STREET ADDRESS	420 N 20TH ST	
CITY-ST-ZIP	BIRMINGHAM AL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	NONNENGARD, JIM	
STREET ADDRESS	112 N. 20TH STREET	
CITY-ST-ZIP	BIRMINGHAM AL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BENNERS, MORRIS	
STREET ADDRESS	112 N 20TH ST	
CITY-ST-ZIP	BIRMINGHAM AL	
TITLE	CEOD	<input type="checkbox"/> Delete
NAME	PORTER, JOHN D.	
STREET ADDRESS	112 N 20TH ST., 7TH FLOOR	
CITY-ST-ZIP	BIRMINGHAM AL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Paul Gourley	
STREET ADDRESS	100 Brookwood Place Suite 300	
CITY-ST-ZIP	Birmingham, AL 35209	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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:

Jara O Farmer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-01

Date

205-254-

Daytime Phone #

6206

CR2E034 (10/00)