


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 20, 2007 8:00 am**  
**Secretary of State**

03-20-2007 90013 046 \*\*\*158.75

**DOCUMENT # P31121**  
 1. Entity Name  
**COLLATERAL AGENCY, INC.**



Principal Place of Business  
**1900 CRESTWOOD BLVD.  
 BIRMINGHAM, AL 35210**


Mailing Address  
**1900 CRESTWOOD BLVD.  
 BIRMINGHAM, AL 35210**

2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 Zip Country

40038000



02272007 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION, FL 33324**

4. FEI Number  
**63-6007227**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

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. I am familiar with, and accept the obligations of registered agent.

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**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	S	<input type="checkbox"/> Delete
NAME	BROWN, JANET C	
STREET ADDRESS	1900 CRESTWOOD BLVD.	
CITY-ST-ZIP	BIRMINGHAM, AL 35210	
TITLE	PTD	<input type="checkbox"/> Delete
NAME	RATLIFF, WILLIAM T., III	
STREET ADDRESS	1900 CRESTWOOD BLVD.	
CITY-ST-ZIP	BIRMINGHAM, AL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	STONE, CHERYL	
STREET ADDRESS	1900 CRESTWOOD BLVD	
CITY-ST-ZIP	BIRMINGHAM, AL 35210	
TITLE	D	<input type="checkbox"/> Delete
NAME	JENNINGS, JR, ROBERT W	
STREET ADDRESS	1900 CRESTWOOD	
CITY-ST-ZIP	BIRMINGHAM, AL 35210	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

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	Senior Vice President	<input checked="" 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		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Janet C. Brown Date: 3/12/07 Daytime Phone #: 205/951-4433  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR