## 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000004578

Entity Name: REGIONS CAPITAL ADVANTAGE, INC.

**Current Principal Place of Business:** 

1900 FIFTH AVENUE NORTH SUITE 2400 BIRMINGHAM, AL 35203

# **Current Mailing Address:**

1900 FIFTH AVENUE NORTH SUITE 2400 BIRMINGHAM, AL 35203

# FEI Number: 62-1764807

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US FILED Apr 14, 2017 Secretary of State CC4735846122

Date

Certificate of Status Desired: No

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

## Officer/Director Detail :

Title	DIRECTOR, PRESIDENT	Title	DIRECTOR
Name	BUCKNER, BO (JAMES R)	Name	SPEIR, TOM
Address	1900 FIFTH AVENUE NORTH SUITE 2400	Address	1900 FIFTH AVENUE NORTH SUITE 2400
City-State-Zip:	BIRMINGHAM AL 35203	City-State-Zip:	BIRMINGHAM AL 35203
Title	DIRECTOR	Title	ASST. SECRETARY
Name	ELLIS, ROBERT	Name	WELCH, PAMELA R
Address	1900 FIFTH AVENUE NORTH, STE 2400	Address	315 DEADRICK STREET 5TH FLOOR
City-State-Zip:	BIRMINGHAM AL 35203	City-State-Zip:	NASHVILLE TN 37237
Title	DIRECTOR	Title	DIRECTOR
Name	BOYEN, WENDI	Name	UNDERBERG, SCOTT
Address	1900 FIFTH AVENUE NORTH SUITE 2400	Address	1900 FIFTH AVENUE NORTH SUITE 2400
City-State-Zip:	BIRMINGHAM AL 35203	City-State-Zip:	BIRMINGHAM AL 35203
Title	SECRETARY, TREASURER	Title	DIRECTOR
l itle Name	SECRETARY, TREASURER HORTON, RICHARD	Title Name	DIRECTOR PERRY, WILLIAM C
	,		
Name	HORTON, RICHARD 1900 FIFTH AVENUE NORTH SUITE 2400	Name	PERRY, WILLIAM C 1900 FIFTH AVENUE NORTH

## Continues on page 2

I hereby 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 all other like empowered.

#### SIGNATURE: PAMELA R. WELCH

ASSISTANT SECRETARY 04/14/2017

Electronic Signature of Signing Officer/Director Detail

#### **Officer/Director Detail Continued :**

Title	DIRECTOR
Name	SANDERS, TYRUS
Address	1900 FIFTH AVENUE NORTH SUITE 2400
City-State-Zip:	BIRMINGHAM AL 35203