

STUBBS, COLE, BREEDLOVE, PRENTIS & BIGGS, P.L.L.C.

ATTORNEYS AND COUNSELORS AT LAW

122 EAST PARRISH STREET

POST OFFICE BOX 376

DURHAM, NORTH CAROLINA 27702

www.StubbsCole.com

ALLSTON, STUBBS (1909-2003)

JAMES A. COLE, JR. (1935-2006)

IRVIN P. BREEDLOVE, JR. (1946-2003)

RICHARD F. PRENTIS, JR.*

C. THOMAS BIGGS

JONATHAN W. BIGGS

ROBIN M. BAREFOOT

C. SCOTT HOLMES

WILLIAM H. PATE

BRYSON M. ALDRIDGE

*ALSO ADMITTED IN FLORIDA

TELEPHONE

(919) 682 - 9331

TELEFAX

(919) 682 - 5590

REAL ESTATE TELEFAX

(919) 688 - 0277

GENERAL E-MAIL

Info@StubbsCole.com

WRITER'S DIRECT E-MAIL

bmaldridge@StubbsCole.com

Thursday, November 30, 2006

Federal Election Commission
999 E. Street, N.W.
Washington, DC 20463

**CERTIFIED MAIL RETURN RECEIPT
REQUESTED**

Re: SunTrust Bank Good Government Group – Carolinas
Id#: 0087502

To whom to may concern,

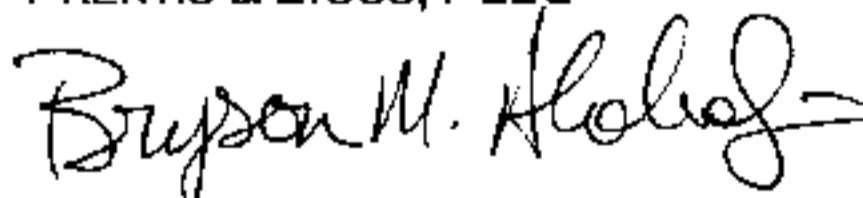
Enclosed is the FEC Form 1, Statement of Organization, for SunTrust Bank Good Government Group – Carolinas, FEC identification number 0087502. The form indicates a change in the current Treasurer for the Group. Thank you for your time.

Please let me know if anything further is required.

With all best wishes, I am

Very truly yours,

STUBBS, COLE, BREEDLOVE,
PRENTIS & BIGGS, PLLC



Bryson M. Aldridge

BMA/RFP/hhd

Cc: Mr. Lester W. Edwards Jr.
Mr. Robert Ramey

28039313302

FEC
FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

SunTrust Bank Good Government Group - Carolinas

ADDRESS (number and street) (Check if address is changed)

111 Corcoran Street
Post Office Box 931
Durham NC 27702-0931

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

Robert.ramey@SunTrust.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

919-932-2795

2. DATE

3. FEC IDENTIFICATION NUMBER ▶ C 0087502

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Robert Ramey
Type or Print Name of Treasurer

Signature of Treasurer *Robert Ramey* Date 12 08 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only					For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2003)
-----------------	--	--	--	--	---	---------------------------------

26039313363

5. TYPE OF COMMITTEE (Check One)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
-----------------------------	----------------	-------	--------	-----------	----------------

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

8. Name of Any Connected Organization or Affiliated Committee

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

Type of Connected Organization:

- | | | |
|-------------------------|-------------------------------|--------------------|
| Corporation | Corporation w/o Capital Stock | Labor Organization |
| Membership Organization | Trade Association | Cooperative |

28059313364

Write or Type Committee Name

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name _____

Mailing Address _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

_____ Telephone number _____-_____-_____

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Robert Ramey _____

Mailing Address 1414 Raleigh Road _____
 Suite 150 _____
 Chapel Hill NC 27517 _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Sr. Financial Officer _____ Telephone number 919-683-6530

Full Name of Designated Agent _____

Mailing Address _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

_____ Telephone number _____-_____-_____

26039313305

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

26039313366

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) <i>11/30/06</i>
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JAD
 PREPARER
 (3/2005)

12/20/06
 DATE PREPARED

26039313367