

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2003 8:00 am
Secretary of State

02-04-2003 90114 049 ***150.00

DOCUMENT # **813294**



1. Entity Name
MERRILL LYNCH, PIERCE, FENNER & SMITH INCORPORATED

Principal Place of Business
**WORLD FINANCIAL CTR. NORTH TOWER
250 VESEY ST.
NEW YORK NY 10281
US**

Mailing Address
**222 BROADWAY
17TH FLOOR
NEW YORK NY 10038
US**



2. Principal Place of Business
4 World Financial Ctr.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
New York, NY

City & State

4. FEI Number **13-5674085**

Applied For
Not Applicable

Zip **10080** Country **USA**

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

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

See Attachment for list of Officers

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
NAME **D PATRICK, THOMAS H**
STREET ADDRESS **250 VESEY STREET**
CITY-ST-ZIP **NEW YORK NY**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME **EVP KENNEY, JEROME P**
STREET ADDRESS **250 VESEY STREET**
CITY-ST-ZIP **NEW YORK NY**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME **CEOD STEFFENS, JOHN L**
STREET ADDRESS **250 VESEY STREET**
CITY-ST-ZIP **NEW YORK NY**

TITLE Change Addition
NAME **CHAIRMAN OF THE BOARD**
STREET ADDRESS **E. STANLEY O'NEAL**
CITY-ST-ZIP **4 World Financial Center
New York NY 10080**

TITLE Delete
NAME **GCD SCHIEREN, GEORGE A**
STREET ADDRESS **250 VESEY ST**
CITY-ST-ZIP **NEW YORK NY**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME **T STOMBER, JOHN C**
STREET ADDRESS **225 LIBERTY STREET**
CITY-ST-ZIP **NEW YORK NY 10080**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME **S DULBERG, ANDREA L**
STREET ADDRESS **222 BROADWAY**
CITY-ST-ZIP **NEW YORK NY 10038**

TITLE Change Addition
NAME **SECRETARY**
STREET ADDRESS **Judith A. Willerschein**
CITY-ST-ZIP **222 Broadway
New York, NY 10038**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* Assistant Secretary 1/30/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)