

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90181 046 ***158.75

DOCUMENT # 842517

1. Entity Name
CHARLES SCHWAB & CO., INC.



Principal Place of Business
**101 MONTGOMERY ST
SAN FRANCISCO, CA 94104**

Mailing Address
**101 MONTGOMERY STREET
REGISTRATION DEPT 101-22
SAN FRANCISCO, CA 94104 US**

20048040



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04112005 Chg-P CR2E034 (10/03)

4. FEI Number
94-1737782

Applied For
Not Applicable

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
POTTRUCK, DAVID S
101 MONTGOMERY ST.
SAN FRANCISCO, CA 94104** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
SCHWAB, CHARLES R
101 MONTGOMERY ST.
SAN FRANCISCO, CA 94104** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CHAIRMAN & CEO & DIRECTOR ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVPD
DODDS, CHRISTOPHER V
101 MONTGOMERY ST.
SAN FRANCISCO, FL 94104** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
FISHEL, THOMAS C
101 MONTGOMERY STREET
SAN FRANCISCO, CA** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVP & TREASURER
JOSEPH R. MARTINETTO
101 MONTGOMERY ST., SAN FRANCISCO, CA 94104** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVCS
DWYER, CARRIE
101 MONTGOMERY STREET
SAN FRANCISCO, CA 94104** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ASST. CORP. SEC.
JANE E. FRY
101 MONTGOMERY ST., SAN FRANCISCO, CA 94104** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

JANE E. FRY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/21/05

(415)636-3241