

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005567

FILED  
Apr 13, 2009  
Secretary of State

Entity Name: UBS AMERICAS INC.

**Current Principal Place of Business:**

677 WASHINGTON BLVD.  
STAMFORD, CT 06901

**New Principal Place of Business:**

**Current Mailing Address:**

677 WASHINGTON BLVD.  
STAMFORD, CT 06901

**New Mailing Address:**

FEI Number: 06-1595848

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: RESSEL, TERESA  
Address: 677 WASHINGTON BLVD.  
City-St-Zip: STAMFORD, CT 06901 US

Title: DT ( ) Delete  
Name: DYRVIK, PER  
Address: 677 WASHINGTON BLVD.  
City-St-Zip: STAMFORD, CT 06901 US

Title: D ( ) Delete  
Name: SCHWYTER, ANNELIESE  
Address: 677 WASHINGTON BLVD.  
City-St-Zip: STAMFORD, CT 06901 US

Title: AS ( ) Delete  
Name: NUTSON, JANE E  
Address: 677 WASHINGTON BLVD.  
City-St-Zip: STAMFORD, CT 06901

Title: D (X) Delete  
Name: TUCKNER, TODD  
Address: 677 WASHINGTON BLVD.  
City-St-Zip: STAMFORD, CT 06901 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CPC (X) Change ( ) Addition  
Name: CAROLYN, WIND  
Address: 677 WASHINGTON BLVD.  
City-St-Zip: STAMFORD, CT 06901 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: AT (X) Change ( ) Addition  
Name: LOUIS, DEVICO  
Address: 1000 HARBOUR BLVD  
City-St-Zip: WEEHAWKEN, NJ 07086 US

Title: S (X) Change ( ) Addition  
Name: NUTSON, JANE E  
Address: 677 WASHINGTON BLVD.  
City-St-Zip: STAMFORD, CT 06901

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JANE E. NUTSON

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04/13/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date