

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jun 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000093750 (2)

1. Corporation Name

AWAD ASSET MANAGEMENT, INC

Principal Place of Business

THE OFFICES OF RAYMOND JAMES FINANCIAL
880 CARILLON PKY.
ST. PETERSBURG FL 33733

Mailing Address

THE OFFICES OF RAYMOND JAMES FINANCIAL
880 CARILLON PKY.
ST. PETERSBURG FL 33733

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/01/1997

4. FEI Number

58-2372400

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30

FILED BY PARENT

9. Name and Address of Current Registered Agent

JACOBS, RICHARD O
200 CENTRAL AVE., STE. 1800
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent

COMPANY

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

100002546901

83 -06/04/98--01004--043

84 City

***150.00

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature. Specify printed name of registered agent and title (applicable)

(NOTE: Registered Agent signs are required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director and Chairman ☐ Change ☒ Addition

1.2 NAME

James D. Awad

1.3 STREET ADDRESS

One East End Ave., Apt 6C

1.4 CITY-ST-ZIP

New York City, NY 10021

2.1 TITLE Director ☐ Change ☒ Addition

2.2 NAME

Richard Riess

2.3 STREET ADDRESS

880 Carillon Parkway

2.4 CITY-ST-ZIP

St. Petersburg, FL 33733

3.1 TITLE President ☐ Change ☒ Addition

3.2 NAME

Dennis Ieru

3.3 STREET ADDRESS

880 Carillon Parkway

3.4 CITY-ST-ZIP

St. Petersburg, FL 33733

4.1 TITLE Secretary & Treasurer ☐ Change ☒ Addition

4.2 NAME

Jeffrey P. Julien

4.3 STREET ADDRESS

880 Carillon Parkway

4.4 CITY-ST-ZIP

St. Petersburg, FL 33733

5.1 TITLE Ass't. Secretary/Treas. ☐ Change ☒ Addition

5.2 NAME

Grace Pilsha

5.3 STREET ADDRESS

880 Carillon Parkway

5.4 CITY-ST-ZIP

St. Petersburg, FL 33733

6.1 TITLE Ass't. Secretary/Treasurer ☐ Change ☒ Addition

6.2 NAME

Carol Ejan

6.3 STREET ADDRESS

880 Carillon Parkway

6.4 CITY-ST-ZIP

St. Petersburg, FL 33733

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: Jeffrey P. Julien

4/16/98 813.573.3800

CR2E034 (10/97)