2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #435930

1. Entity Name

RAYMOND JAMES FINANCIAL SERVICES, INC.

800 CARILLON PKWY SAINT PETERSBURG, FL 33716

Principal Place of Business

Mailing Address **800 CARILLON PKWY** SAINT PETERSBURG, FL 33716

FILED Apr 27, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04172006 CR2E034 (11/05) No Chg-P

4. FEI Number 59-1531281 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MATECKI, PAUL L 880 CARILLON PARKWAY ST. PETERSBURG, FL 33716

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pulions of registered agent.	rpose of changin	ng its registered offic	ce or registered agent	, or both, in the State of Florida.) am familiar with, and accept
SIGNATURE.	Stgreture, typed or printed name of registered agent and title if	epplicable.	(NOTE, Registered Agent of	reguired when reinst	aling) DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution. Added to Fees			
10.	OFFICERS AND DIRECT	TORS	{		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FRANZ, RICHARD B II 880 CARILLON PKWY SAINT PETERSBURG, FL 33716				05/08/06-80090-005 150.00 05/08/06-80090-005 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HELCK, CHET B 880 CARILLON PARKWAY ST PETERSBURG, FL 337332749				•
TITLE NAME STREET ADDRESS CRY-ST-ZIP	DC AVERITT, RICHARD G 880 CARILLON PARKWAY ST PETERSBURG, FL 337332749			0	OO NOT WRITE
TITLE NAME STREET ADDRESS CYTY-ST-ZIP	DV FULP, JAMES A 880 CARILLON PARKWAY ST PETERSBURG, FL 337332749		_	1	N THIS SPACE
TITLE TRAME STREET ADDRESS CITY-ST-ZIP	AVS HAAS, MARY 880 CARILLON PARKWAY ST PETERSBURG, FL 337332749				
TITLE MAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and eccurate 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 charged, or on an attachment with an address, with all other like empowered.

727-127-3800