

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001672

Entity Name: M&T SECURITIES, INC.

FILED  
Apr 08, 2009  
Secretary of State

## Current Principal Place of Business:

285 DELAWARE AVE.  
200  
BUFFALO, NY 14202

## New Principal Place of Business:

## Current Mailing Address:

285 DELAWARE AVE.  
200  
BUFFALO, NY 14202

## New Mailing Address:

FEI Number: 16-1263079

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION, FL 33324 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: P ( ) Delete  
Name: RANDALL, CHRISTOPHER  
Address: 5205 FOX TRACE  
City-St-Zip: WILLIAMSVILLE, NY 14221

Title: S ( ) Delete  
Name: KING, MARIE  
Address: 41 COVE HOLLOW  
City-St-Zip: WEST SENECA, NY 14224

Title: T ( ) Delete  
Name: CAROL, GOULDING  
Address: 6331 EVERWOOD CT. S.  
City-St-Zip: E. AMHERST, NY 14051

Title: D ( ) Delete  
Name: CZARNECKI, MARK J  
Address: 5019 ROCK HAVEN  
City-St-Zip: CLARENCE, NY 14031

Title: VP ( ) Delete  
Name: KOPSA, JERROLD  
Address: 13616 WHITNEY ROAD  
City-St-Zip: HOLLAND, NY 14080

Title: D ( ) Delete  
Name: GUERRIERI, SALVATORE JR.  
Address: 340 SANDRINGHAM RD.  
City-St-Zip: ROCHESTER, NY 14610

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JERROLD KOPSA

VP

04/08/2009

Electronic Signature of Signing Officer or Director

Date