2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 435930

Entity Name: RAYMOND JAMES FINANCIAL SERVICES, INC.

FILED
May 28, 2020
Secretary of State
3858559229CC

Current Principal Place of Business:

880 CARILLON PARKWAY ST. PETERSBURG. FL 33716

Current Mailing Address:

880 CARILLON PARKWAY ST. PETERSBURG. FL 33716 US

FEI Number: 59-1531281 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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

Officer/Director Detail:

Title	SECRETARY	Title	DIRECTOR
Name	GUICE, BROCK A.	Name	PERRY, JODI

Address 880 CARILLON PARKWAY Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716

Title TREASURER Title CFO

NameSHOUKRY, PAUL M.NameOLLIA, MARSHALL F.Address880 CARILLON PARKWAYAddress880 CARILLON PARKWAYCity-State-Zip:ST. PETERSBURG FL 33716City-State-Zip:ST. PETERSBURG FL 33716

Title CHAIRMAN & PRESIDENT Title DIRECTOR

Name CURTIS. SCOTT A. Name GEIS, WILLIAM C.

Address 880 CARILLON PARKWAY Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR Title DIRECTOR

Name CAMPAGNOLI, VINCENT J. Name CURTIS, SCOTT A.

Address 880 CARILLON PARKWAY Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: BROCK A. GUICE SECRETARY 05/28/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

NameTREMAINE, THOMAS R.Address880 CARILLON PARKWAYCity-State-Zip:ST. PETERSBURG FL 33716