## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000048286

Entity Name: INTL FCSTONE FINANCIAL INC.

**Current Principal Place of Business:** 

329 PARK AVE. N. SUITE 350

WINTER PARK, FL 32789

**Current Mailing Address:** 

329 PARK AVE. N.

SUITE 350

WINTER PARK, FL 32789 US

FEI Number: 59-3514167 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEPHTON, BRIAN T 329 PARK AVE. N.

SUITE 350

WINTER PARK,, FL 32789 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

**FILED** Jan 25, 2016

**Secretary of State** 

CC9159008865

Officer/Director Detail:

Title D/CHAIRMAN, PRESIDENT Title CFO, DIRECTOR O'CONNOR, SEAN M Name Name DUNAWAY, WILLIAM J

1251 NW BRIARCLIFF PARKWAY Address 329 PARK AVE. N. Address

SUITE 800 SUITE 350

City-State-Zip: WINTER PARK FL 32789 City-State-Zip: KANSAS CITY MO 64116

Title **SECRETARY** Title DFVP

Name BOLTE, DAVID A Name SEPHTON, BRIAN T

Address 2829 WESTOWN PARKWAY Address 329 PARK AVE. N., SUITE 350

SUITE 100 City-State-Zip:

WINTER PARK FL 32789 City-State-Zip: WEST DES MOINES IA 50266

Title COO, DIRECTOR Title DIRECTOR, EXECUTIVE VP Name NGUYEN, XUONG

LYON, CHARLES M Name Address 230 SOUTH LASALLE Address 329 PARK AVE. N.

**SUITE 10-500** 

SUITE 350 City-State-Zip: CHICAGO IL 60604

City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR, CHIEF RISK OFFICER SMITH, PHILIP Name Name HARROD, TRICIA

Address 329 PARK AVE. N. Address 1251 NW BRIARCLIFF PARKWAY **SUITE 350** 

SUITE 800

WINTER PARK FL 32789 City-State-Zip: KANSAS CITY MO 64116 City-State-Zip:

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.

Title

DIRECTOR

01/25/2016 SIGNATURE: DAVID A. BOLTE SECRETARY