2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002544

Entity Name: W&S BROKERAGE SERVICES, INC.

Current Principal Place of Business:

400 BROADWAY, MS 36 CINCINNATI, OH 45202

Current Mailing Address:

400 BROADWAY, MS 36 CINCINNATI, OH 45202

FEI Number: 31-0846576 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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

FILED Jan 09, 2017

Secretary of State

CC0019048283

Officer/Director Detail :

Title DIRECTOR Title DIRECTOR

MCGRUDER, JILL T WUEBBLING, DONALD J Name Name

303 BROADWAY SUITE 1100 400 BROADWAY Address Address

City-State-Zip: CINCINNATI OH 45202 CINCINNATI OH 45202 City-State-Zip:

Title CHIEF COMPLIANCE OFFICER Title DIRECTOR

Name STEARNS, TIMOTHY S DUNN, BRYAN C Name Address 303 BROADWAY MS P-3 Address 400 BROADWAY CINCINNATI OH 45202

City-State-Zip: City-State-Zip: CINCINNATI OH 45202

Title **TREASURER** Title **SECRETARY** Name VANCE, JAMES J Name MAHONEY, MARK Address 400 BROADWAY 400 BROADWAY Address

City-State-Zip: CINCINNATI OH 45202 CINCINNATI OH 45202 City-State-Zip:

Title DIRECTOR Title **PRESIDENT**

Name WALKER, ROBERT L BRODIE, TROY Name 400 BROADWAY, MS 36 Address 400 BROADWAY, MS 36 Address City-State-Zip: CINCINNATI OH 45202 CINCINNATI OH 45202 City-State-Zip:

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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: TIMOTHY S STEARNS

CCO

01/09/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP Title VP

Name REEVES, STEVEN O Name DELUCA, JAMES J
Address 400 BROADWAY, MS 36 Address 400 BROADWAY, MS 36

City-State-Zip: CINCINNATI OH 45202 City-State-Zip: CINCINNATI OH 45202

Title VP Title CFO

Name LOVELESS, MATTHEW W Name WIEDENHEFT, TERRIE A

Address 400 BROADWAY, MS 36 Address 303 BROADWAY

STE 1100

City-State-Zip: CINCINNATI OH 45202 City-State-Zip: CINCINNATI OH 45202