

2015 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

Officer/Director Detail :

Title DIRECTOR
Name MCGRUDER, JILL T
Address 303 BROADWAY SUITE 1100
City-State-Zip: CINCINNATI OH 45202

Title DIRECTOR
Name WUEBBLING, DONALD J
Address 400 BROADWAY
City-State-Zip: CINCINNATI OH 45202

Title DIRECTOR
Name DUNN, BRYAN C
Address 400 BROADWAY
City-State-Zip: CINCINNATI OH 45202

Title CHIEF COMPLIANCE OFFICER
Name MADSEN, KENNETH A
Address 400 BROADWAY, MS 60
City-State-Zip: CINCINNATI OH 45202

Title SECRETARY
Name MAHONEY, MARK
Address 400 BROADWAY
City-State-Zip: CINCINNATI OH 45202

Title TREASURER
Name VANCE, JAMES J
Address 400 BROADWAY
City-State-Zip: CINCINNATI OH 45202

Title PRESIDENT
Name BRODIE, TROY
Address 400 BROADWAY, MS 36
City-State-Zip: CINCINNATI OH 45202

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

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: KENNETH MADSEN

CCO

08/20/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name REEVES, STEVEN O
Address 400 BROADWAY, MS 36
City-State-Zip: CINCINNATI OH 45202

Title VP
Name DELUCA, JAMES J
Address 400 BROADWAY, MS 36
City-State-Zip: CINCINNATI OH 45202

Title VP
Name LOVELESS, MATTHEW W
Address 400 BROADWAY, MS 36
City-State-Zip: CINCINNATI OH 45202