

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000000781

**Entity Name:** TRUIST ADVISORY SERVICES, INC.

**Current Principal Place of Business:**

303 PEACHTREE CENTER AVENUE  
SUITE 140  
ATLANTA, GA 30308

**Current Mailing Address:**

303 PEACHTREE CENTER AVENUE  
SUITE 140  
ATLANTA, GA 30308 US

**FEI Number:** 37-1808847

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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, PRESIDENT  
Name THOMPSON, JOSEPH  
Address 303 PEACHTREE STREET NE  
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR, SECRETARY  
Name MCCALLUM , CHARLES F. III  
Address 303 PEACHTREE STREET NE  
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR  
Name HECHTLINGER, SUSAN  
Address 303 PEACHTREE CENTER AVENUE  
SUITE 140  
City-State-Zip: ATLANTA GA 30308

Title ASSISTANT VICE PRESIDENT  
Name STANBERRY, HASANA  
Address 303 PEACHTREE STREET NE  
City-State-Zip: ATLANTA GA 30308

Title TREASURER  
Name RIP, OLGA  
Address 303 PEACHTREE STREET NE  
City-State-Zip: ATLANTA GA 30308

*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:** CHARLES F MCCALLUM III

**SECRETARY**

**04/22/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date