

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 341815 (9)

1. Corporation Name  
**RAYMOND JAMES & ASSOCIATES, INC.**



Principal Place of Business: 880 CARILLON PKWY. P.O. BOX 12749 ST PETERSBURG FL 33733-2749  
Mailing Address: 880 CARILLON PKWY. P.O. BOX 12749 ST PETERSBURG FL 33733-2749

3. Date Incorporated or Qualified: 02/19/1969  
3a. Date of Last Report: 05/01/1995

21	2. Principal Place of Business	2a	Mailing Address	4	FEI Number	Applied For
	Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-1237041	Not Applicable
22	City & State	27	City & State	5	Certificate of Status Desired	\$8.75 Additional Fee Required
	Zip	28	Zip		<input type="checkbox"/>	
23	Country	29	Country	6	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
		30			<input type="checkbox"/>	
24				8	This corporation has liability for intangible tax under s 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PIPPENGER, LYNN  
880 CARILLON PKWY.  
ST PETERSBURG, FL  
33716

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	CD
NAME	JAMES, THOMAS A	1.2 NAME	JAMES, THOMAS A.
STREET ADDRESS	7977 9TH AVE S	1.3 STREET ADDRESS	880 CARILLON PKWY.
CITY-ST-ZIP	ST PETERSBURG, FL 00000	1.4 CITY-ST-ZIP	ST. PETERSBURG, FL. 33716
TITLE	STVD	2.1 TITLE	STVD
NAME	PIPPENGER, LYNN	2.2 NAME	PIPPENGER, LYNN
STREET ADDRESS	19500 GULF BLVD, STE. 105	2.3 STREET ADDRESS	880 CARILLON PKWY.
CITY-ST-ZIP	INDIAN ROCKS BEACH FL	2.4 CITY-ST-ZIP	ST. PETERSBURG, FL. 33716
TITLE	EVD	3.1 TITLE	EVD
NAME	SHUCK, ROBERT F	3.2 NAME	SHUCK, ROBERT F.
STREET ADDRESS	7991 11TH AVE S	3.3 STREET ADDRESS	880 CARILLON PKWY.
CITY-ST-ZIP	ST PETERSBURG, FL 00000	3.4 CITY-ST-ZIP	ST. PETERSBURG, FL. 33716
TITLE	EVD	4.1 TITLE	EVD
NAME	ZANK, DENNIS W.	4.2 NAME	ZANK, DENNIS W.
STREET ADDRESS	2833 CHELSEA PL, S	4.3 STREET ADDRESS	880 CARILLON PKWY.
CITY-ST-ZIP	CLEARWATER FL	4.4 CITY-ST-ZIP	ST. PETERSBURG, FL. 33716
TITLE	PD	5.1 TITLE	PD
NAME	FRANKE, THOMAS	5.2 NAME	FRANKE, THOMAS
STREET ADDRESS	4907 PROVIDENCE	5.3 STREET ADDRESS	880 CARILLON PKWY.
CITY-ST-ZIP	TAMPA FL	5.4 CITY-ST-ZIP	ST. PETERSBURG, FL. 33716
TITLE	V	6.1 TITLE	V
NAME	TREMAINE, THOMAS R.	6.2 NAME	TREMAINE, THOMAS R.
STREET ADDRESS	305 16 AVE NE	6.3 STREET ADDRESS	880 CARILLON PKWY.
CITY-ST-ZIP	ST. PETERSBURG FL	6.4 CITY-ST-ZIP	ST. PETERSBURG, FL. 33716

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X D. W. Zank EXEC. VICE PRES. Date: 4/25/96 813-573-3800  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CFR2E034 (12/95)