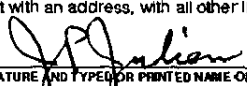


FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90966 037 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 444750			
1. Entity Name RAYMOND JAMES FINANCIAL, INC.			
Principal Place of Business 880 CARILLON PARKWAY P.O. BOX 12749 ST PETERSBURG, FL 33733-2749		Mailing Address 880 CARILLON PARKWAY P.O. BOX 12749 ST PETERSBURG, FL 33733-2749	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		4. FEI Number 59-1517485	
		Applied For ☐ Not Applicable	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MATECKI, PAUL L 880 CARILLON PARKWAY ST. PETERSBURG, FL 33716		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD JAMES, THOMAS A. 880 CARILLON PARKWAY ST. PETERSBURG, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDet B. Helck Chet B. Helck 880 Carillon Parkway St. Petersburg, FL ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD SHUCK, ROBERT F. 880 CARILLON PARKWAY ST. PETERSBURG, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC VC ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAS PIPPENGER, LYNN 880 CARILLON PARKWAY ST PETERSBURG, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Barry S. Augenbraun 880 Carillon Parkway St. Petersburg, FL ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVD GREENE, M. ANTHONY 1647 MT VERNON RD #250 ATLANTA, GA ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Don Kenneth A. Shields 880 Carillon Parkway St. Petersburg, FL ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV JULIEN, JEFFREY P 880 CARILLON PKWY SAINT PETERSBURG, FL 33716 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GODBOLD, FRANCIS S 880 CARILLON PKWY. ST. PETE., FL 33716 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(I), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  Jeffrey P. Julien		Date: 4-26-03 727-567-3800	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR2E034 (10/02)