

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 16, 2001 8:00 am**  
**Secretary of State**

05-16-2001 90033 035 \*\*\*150.00

**DOCUMENT # 820487**

1. Entity Name

**A.G. EDWARDS & SONS, INC.**

Principal Place of Business

**ONE NORTH JEFFERSON  
 ST LOUIS MI 63103**

Mailing Address

**ONE NORTH JEFFERSON  
 ST LOUIS MI 63103**

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 **43-0895447**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	CPD	<input checked="" type="checkbox"/> Delete
NAME	EDWARDS III, BENJAMIN F.	
STREET ADDRESS	ONE NORTH JEFFERSON	
CITY-ST-ZIP	ST. LOUIS MO	
TITLE	CVP	<input checked="" type="checkbox"/> Delete
NAME	PROOST, ROBERT L	
STREET ADDRESS	ONE N JEFFERSON	
CITY-ST-ZIP	ST LOUIS MO	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	KELLY, DOUGLAS L	
STREET ADDRESS	ONE NORTH JEFFERSON	
CITY-ST-ZIP	ST LOUIS MO	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MARTIN, THOMAS H JR	
STREET ADDRESS	ONE NORTH JEFFERSON	
CITY-ST-ZIP	ST LOUIS MO 63103	
TITLE	VP SR VP	<input type="checkbox"/> Delete
NAME	PORTER, JOSEPH	
STREET ADDRESS	ONE NORTH JEFFERSON	
CITY-ST-ZIP	ST. LOUIS MO 63103	
TITLE	AV	<input checked="" type="checkbox"/> Delete
NAME	BURRIS, DONNA	
STREET ADDRESS	ONE NORTH JEFFERSON	
CITY-ST-ZIP	ST. LOUIS MO	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CEO	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robert L. Bagby	
STREET ADDRESS	ONE NORTH JEFFERSON	
CITY-ST-ZIP	ST LOUIS, MO	
TITLE	President	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Benjamin F. Edwards IV	
STREET ADDRESS	ONE NORTH JEFFERSON	
CITY-ST-ZIP	St. Louis, MO	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SR.V.P.	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	AVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHN MIMILTZ	
STREET ADDRESS	ONE NORTH JEFFERSON	
CITY-ST-ZIP	ST. LOUIS MO 63103	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment

A.G. EDWARDS, INC.

(Holding Company)

State of Incorporation - Delaware  
Date of Incorporation - April 14, 1983  
Tax ID #43-1288229

843216

BOARD OF DIRECTORS

# 820487

Robert L. Bagby, Ch.  
E. Eugene Carter  
Charmaine S. Chapman  
Benjamin F. Edwards IV, V. Ch.  
Samuel C. Hutchinson, Jr.  
Ronald J. Kessler, V. Ch.  
Mark S. Wrighton

ADVISORY DIRECTORS

Douglas L. Kelly  
Paul F. Pautler

OFFICERS

CEO - Robert L. Bagby  
President and Vice Chairman - Benjamin F. Edwards, IV  
~~Vice Chairman - Ronald J. Kessler~~  
Vice President, Treasurer, CFO & Secretary - Douglas L. Kelly  
Assistant Treasurer - Thomas H. Martin, Jr.  
Assistant Treasurer - Joseph G. Porter  
Assistant Secretary - Mary A. Vahlkamp

(March 1, 2001)