

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2004 8:00 am
Secretary of State

03-30-2004 90013 035 ***150.00

DOCUMENT # 835769

1. Entity Name

QUICK & REILLY, INC.



Principal Place of Business

26 BROADWAY
 14TH FLOOR ACCOUNTING
 NEW YORK NY 10004
 US

Mailing Address

26 BROADWAY
 14TH FLOOR ACCOUNTING
 NEW YORK NY 10004
 US

94039866



MOORE CR2E034 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **13-2779884**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

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

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 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: CEO
 NAME: FROUDE, DONALD E Delete
 STREET ADDRESS: 26 BROADWAY CORP
 CITY-ST-ZIP: NEW YORK NY 10004

TITLE: P, CEO, D. Change Addition
 NAME: FROUDE, DONALD E
 STREET ADDRESS: 26 BROADWAY 14TH FLOOR
 CITY-ST-ZIP: NEW YORK, NY 10004

TITLE: COD Delete
 NAME: BOTT, ROBERT
 STREET ADDRESS: 26 BROADWAY CORP
 CITY-ST-ZIP: NEW YORK NY 10004

TITLE: D, COO, VP Change Addition
 NAME: BOTT, ROBERT
 STREET ADDRESS: 26 BROADWAY 14TH FLOOR
 CITY-ST-ZIP: NEW YORK, NY 10004

TITLE: AS Delete
 NAME: DORFMAN, BETH
 STREET ADDRESS: 26 BROADWAY LEGAL DEPT
 CITY-ST-ZIP: NEW YORK NY 10004

TITLE: S, GC Change Addition
 NAME: DORFMAN, BETH
 STREET ADDRESS: 26 BROADWAY 14TH FLOOR
 CITY-ST-ZIP: NEW YORK, NY 10004

TITLE: D Delete
 NAME: MOYNIHAN, BRIAN
 STREET ADDRESS: 100 FEDERAL ST FLEETPRESTON FIN CORP
 CITY-ST-ZIP: BOSTON MA 02110

TITLE: SC, AS Change Addition
 NAME: GOLDMEER, MICHELLE
 STREET ADDRESS: 26 BROADWAY 14TH FLOOR
 CITY-ST-ZIP: NEW YORK, NY 10004

TITLE: CFO Delete
 NAME: SAX, CHARLES
 STREET ADDRESS: 26 BROADWAY ACCT
 CITY-ST-ZIP: NEW YORK NY 10004

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
 CITY-ST-ZIP:

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

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: *Charles E. Sax*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-10-04 212-747-6694

Date

Daytime Phone #