

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90294 007 ***158.75

DOCUMENT # 842517

1. Entity Name
CHARLES SCHWAB & CO., INC.

Principal Place of Business

**101 MONTGOMERY ST
 SAN FRANCISCO CA 94104**

Mailing Address

**101 MONTGOMERY STREET
 REGISTRATION. 88-3
 SAN FRANCISCO CA 94104
 US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

101 MONTGOMERY ST.

Suite, Apt. #, etc.

REGISTRATION DEPT. 101-22

City & State

SAN FRANCISCO, CA

Zip

94104

Country

US

4. FEI Number

94-1737782

Applied For

Not Applicable

5. Certificate of Status Desired

XX

**\$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)**

XX

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 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 PD
NAME POTTRUCK, DAVID S
STREET ADDRESS 101 MONTGOMERY ST.
CITY-ST-ZIP SAN FRANCISCO CA 94104

☐ Delete

TITLE EVPC
NAME LEPORE, DAWN G
STREET ADDRESS 101 MONTGOMERY ST.
CITY-ST-ZIP SAN FRANCISCO CA 94104

XX Delete

TITLE EVPC
NAME SCHEID, STEVEN L
STREET ADDRESS 101 MONTGOMERY ST.
CITY-ST-ZIP SAN FRANCISCO FL 94104

XX Delete

TITLE VP
NAME FISHEL, THOMAS C
STREET ADDRESS 101 MONTGOMERY STREET
CITY-ST-ZIP SAN FRANCISCO CA

☐ Delete

TITLE EVP
NAME DWYER, CARRIE
STREET ADDRESS 101 MONTGOMERY STREET
CITY-ST-ZIP SAN FRANCISCO CA

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE CHAIRMAN & DIRECTOR
NAME CHARLES R. SCHWAB
STREET ADDRESS 101 MONTGOMERY ST.
CITY-ST-ZIP SAN FRANCISCO, CA 94104

☐ Change **XX** Addition

TITLE EVP, CFO, & DIRECTOR
NAME CHRISTOPHER V. DODDS
STREET ADDRESS 101 MONTGOMERY ST.
CITY-ST-ZIP SAN FRANCISCO, CA 94104

☐ Change **XX** Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE EVP & CORP. SECRETARY
NAME DWYER, CARRIE
STREET ADDRESS 101 MONTGOMERY ST.
CITY-ST-ZIP SAN FRANCISCO, CA 94104

XX Change ☐ Addition

TITLE DIRECTOR
NAME SHEILA J. LINDSAY
STREET ADDRESS 101 MONTGOMERY ST.
CITY-ST-ZIP SAN FRANCISCO, CA 94104

☐ Change **XX** Addition

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:

SHEILA J. LINDSAY, DIRECTOR

04/22/2002

(415) 636-8474

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)