

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90004 032 ***150.00

DOCUMENT # F99000006044

1. Entity Name
WILMINGTON BROKERAGE SERVICES COMPANY

Principal Place of Business
**1100 NORTH MARKET STREET
 WILMINGTON DE 19801**

Mailing Address
**1100 NORTH MARKET STREET
 WILMINGTON DE 19801**



DO NOT WRITE IN THIS SPACE

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

51-0261677

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

**LYNAM, CURTIS L JR.
 2000 PGA BLVD., STE. 4400
 N. PALM BEACH FL 33408**

Name
Kemp C. Stickney

Street Address (P.O. Box Number is Not Acceptable)
2000 PGA Blvd., Ste. 4400

N. Palm Beach, FL 33408

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DSV
 LEAHY, HUGH D JR.
 2022 DELAWARE AVENUE
 WILMINGTON DE 19806** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 Leahy, Hugh D. Jr.
 2022 Delaware Avenue
 Wilmington DE 19806** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PCEO
 GANDOLFO, JAMES C
 1501 TALLEY RD.
 WILMINGTON DE 19803** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DP
 Gandolfo, James C.
 1501 Talley Rd.
 Wilmington DE 19803** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**ST-
 GOODHUE, BETTY M
 1918 LONGVIEW DRIVE
 WILMINGTON DE 19810** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VP
 ARNOTT, CAROL E
 443 BRIAR CREEK DRIVE
 HOCKESSIN DE 19707** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VPCM
 FOX, ROBERT M
 104 S AUGUSTINE COURT
 MIDDLETOWN DE 19709** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DVPCM
 Fox, Robert M.
 104 S. Augustine Court
 Middletown DE 19709** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)