

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02081

FILED  
Feb 15, 2005  
Secretary of State

**Entity Name:** UVEST FINANCIAL SERVICES GROUP, INC.

**Current Principal Place of Business:**

200 SOUTH COLLEGE ST.  
21 FLOOR  
CHARLOTTE, NC 28202

**New Principal Place of Business:**

**Current Mailing Address:**

200 SOUTH COLLEGE ST.  
21 FLOOR  
CHARLOTTE, NC 28202

**New Mailing Address:**

**FEI Number:** 56-1210987

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OSMAN, ARTHUR  
6911 S.W. 64TH COURT  
SOUTH MIAMI, FL 33143 US

**Name and Address of New Registered Agent:**

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:**

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

Title: DCEO ( ) Delete  
Name: ROBINSON, JOHN HENRY JR.  
Address: 270 COVILLE RD.  
City-St-Zip: CHARLOTTE, NC 28207

Title: COO ( ) Delete  
Name: ARNOD, DAN H  
Address: 314 FENTON  
City-St-Zip: CHARLOTTE, NC 28207

Title: SVP ( ) Delete  
Name: VINES, MICHAEL L  
Address: 9300 TILLOT DR.  
City-St-Zip: MATTHEWS, NC 28105

Title: VP ( ) Delete  
Name: PAYNE, TERRI L  
Address: 2100 CHESTERFIELD AVE.  
City-St-Zip: CHARLOTTE, NC 28205

Title: SVP ( ) Delete  
Name: ABOOD, DENISE M  
Address: 329 WENDOVER HILL CT.  
City-St-Zip: CHARLOTTE, NC 28211

Title: SVP ( ) Delete  
Name: FRY, CHARLEY  
Address: 268 PALMER CIRCLE  
City-St-Zip: ROCKWELL, NC 28138

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** ASHLEY D HARVEY

MGR

02/15/2005

Electronic Signature of Signing Officer or Director

Date