

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


**FILED**  
**Apr 18, 2003 8:00 am**  
**Secretary of State**

04-18-2003 90137 050 \*\*\*150.00

0614834 AT

**DOCUMENT # P05032**

1. Entity Name  
**TOWER SQUARE SECURITIES, INC.**



Principal Place of Business % CORP TAX 5PB <b>ONE TOWER SQUARE HARTFORD CT 06183-1190 US</b>	Mailing Address % CORPORATE TAX <b>ONE TOWER SQUARE HARTFORD CT 06183-1190 US</b>
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2. Principal Place of Business <i>Corp tax 19CP</i> Suite, Apt. #, etc. <i>PO Box 990027</i> City & State <i>Hartford, CT</i> Zip <i>06199-0027</i> Country <i>US</i>	3. Mailing Address <i>Corp Tax 19CP</i> Suite, Apt. #, etc. <i>PO Box 990027</i> City & State <i>Hartford, CT</i> Zip <i>06199-0027</i> Country <i>US</i>
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CHECK HERE IF MAKING CHANGES

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <input type="checkbox"/> Delete <b>CASSIDY, EDWARD W JR</b> <b>ONE TOWER SQUARE</b> <b>HARTFORD CT 06183</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <input checked="" type="checkbox"/> Delete <b>LAROSE, MARK</b> <b>ONE TOWER SQUARE</b> <b>HARTFORD CT 06183</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input checked="" type="checkbox"/> Delete <b>MAY, KARREN</b> <b>ONE TOWER SQUARE</b> <b>HARTFORD CT 06183</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <input type="checkbox"/> Delete <b>LAVERTY, JOHN M</b> <b>ONE TOWER SQUARE</b> <b>HARTFORD CT 06183</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <input type="checkbox"/> Delete <b>WRIGHT, ERNEST S</b> <b>ONE TOWER SQUARE</b> <b>HARTFORD CT 06183</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Delete <b>RUSSO, JOANNE K</b> <b>229 SCHOOL STREET</b> <b>MANCHESTER CT</b>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>PO Box 990027</i> <i>Hartford, CT 06199-0027</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>George C. Kokalis</i> <i>PO Box 990027</i> <i>Hartford, CT 06199-0027</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>Glenn Lamney</i> <i>PO Box 990027</i> <i>Hartford, CT 06199-0027</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>PO Box 990027</i> <i>Hartford, CT 06199-0027</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>PO Box 990027</i> <i>Hartford, CT 06199-0027</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>PO Box 990027</i> <i>Hartford, CT 06199-0027</i>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: *[Signature]* **SIGNATURE REQUIRED** *4/14/2003* *860-708-7475*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)

ATTACHMENT

90093563  
PO5032

**TOWER SQUARE SECURITIES, INC.**

(As of February 14, 2003)

**DIRECTORS**

Edward W. Cassidy (3/22/01)  
George C. Kokulis  
Glenn D. Lammey

**Executive Committee**

Edward W. Cassidy (10/24/00)  
Glenn D. Lammey (9/3/02)

**OFFICERS**

Edward W. Cassidy	Chairman of the Board (9/3/02), President and Chief Executive Officer (9/21/00)
Joanne K. Russo	Senior Vice President -Administration
John M. Laverty	Treasurer and Chief Financial Officer (4/1/02)
Stephen E. Abbey	Vice President and Chief Compliance Officer (11/28/00)
Richard N. Bush	Vice President-Taxes
Mark Larose	Vice President and Chief Operating Officer (10/24/00)
George Markoulakis	Vice President – Operations and Trading (6/14/00)
Thomas P. Tooley	Vice President
Ernest J. Wright	Secretary (3/1/02)
Alan Monbaron	Director (9/3/02)
John J. Williams, Jr.	Director, Assistant Compliance Officer and Assistant Secretary
Lewis F. Beers	Assistant Secretary (9/3/02)
Barrett Sidel	Assistant Secretary (9/3/02)
Judith A. Addazio	Assistant Treasurer (12/13/02)
Richard N Bush	Vice President-Taxes