


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004 8:00 am
Secretary of State

01-23-2004 90043 040 ***150.00

DOCUMENT # P08338	
1. Entity Name DB PRIVATE CLIENTS CORP.	

Principal Place of Business P O BOX 1703 WALL STREET STATION NEW YORK, NY 10268	Mailing Address P O BOX 1703 WALL STREET STATION NEW YORK, NY 10268
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2. Principal Place of Business c/o Deutsche Bank	3. Mailing Address c/o Deutsche Bank
Suite, Apt. #, etc. 60 Wall Street, NYC60-4006	Suite, Apt. #, etc. 60 Wall Street, NYC60-4006

City & State New York, NY	City & State New York, NY
Zip 10005	Country USA



01072004 Chg-P CR2E034 (10/03)

4. FEI Number 13-3276234		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$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. 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, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC HOAGLAND, LEIGH W 280 PARK AVE NEW YORK, NY 10015 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUTTLE, ALLAN 280 PARK AVE NEW YORK, NY 10015 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Haigh, Nicholas 280 Park Avenue New York, NY 10015 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LENNAE, LATESSA 280 PARK AVE NEW YORK, NY 10015 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Lowengrub, Michael 280 Park Avenue New York, NY 10015 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WEST, SANDRA 280 PARK AVE NEW YORK, NY 10015 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S West, Sandra L. 60 Wall Street New York, NY 10005 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT DIGRAZIA, JOE 60 WALL STREET NEW YORK, NY 10005 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT MURPHY, ROBERT 280 PARK AVENUE NEW YORK, NY 10006 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Sandra L. West 1/16/04 212 250-8194

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

PS 8338

10. Additional Directors - DB Private Clients Corp.

Title	D
Name	Newbury, Priscilla
Street Address	280 Park Avenue
City-ST-Zip	New York, NY 10015
Title	D
Name	Nestle, Cynthia
Street Address	280 Park Avenue
City-ST-Zip	New York, NY 10015
Title	D
Name	Sturzinger, Peter
Street Address	280 Park Avenue
City-ST-Zip	New York, NY 10015