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FILED
Mar 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P08516 (7)

1. Corporation Name
FIRST UNION BROKERAGE SERVICES, INC.

Principal Place of Business

TWO FIRST UNION CNT 0200
CHARLOTTE NC 28208-7200

Mailing Address

TWO FIRST UNION CNT 0200
CHARLOTTE NC 28208



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

12/23/1985

3a. Date of Last Report

04/24/1996

4. FEI Number

56-1252143

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
FIRST FLORIDA BANK BLDG, STE 420
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME MOODY, DWIGHT
STREET ADDRESS 570 UNIVERSITY BLVD
CITY-ST-ZIP JAX FL

TITLE VP ☐ DELETE

NAME LEIGHTON, WARREN
STREET ADDRESS TWO FIRST UNION CENTER NC0200
CITY-ST-ZIP CHARLOTTE NC

TITLE S ☐ DELETE

NAME HATHAWAY, KENT S.
STREET ADDRESS ONE FIRST UNION CTR
CITY-ST-ZIP CHARLOTTE NC

TITLE T ☐ DELETE

NAME HATCH, JAMES H.
STREET ADDRESS TWO FIRST UNION CNT 0200
CITY-ST-ZIP CHARLOTTE NC

TITLE D ☐ DELETE

NAME CRUTCHFIELD, EDWARD E.
STREET ADDRESS ONE FIRST UNION CENTER
CITY-ST-ZIP CHARLOTTE NC

TITLE D ☐ DELETE

NAME GEORGINIS, JOHN
STREET ADDRESS ONE FIRST UNION CENTER
CITY-ST-ZIP CHARLOTTE NC

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS ONE FIRST UNION CENTER
1.4 CITY-ST-ZIP CHARLOTTE, NC 28208

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-27-97 (704)383-7996

CR2E034 (9/96)