## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #
1. Corporation Name P08516

(7)

FIRST UNION BROKERAGE SERVICES, INC.

TWO FIRST UNION CNT 0200	TWO FIRST UNION ONT 0200	
rincipal Place of Business	Malling Address	
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**FILED** Mar 02 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address			T IMMINISTER ORGANIC MINES TO THE STATE OF T	IBIT BIBIT BIBIT BIBIT 1881		
TWO FIRST UNION CNT 0200 CHARLOTTE NC 28288-7200	TWO FIRST UNION CNT 0200 CHARLOTTE NC 28288-7200		DO NOT WRITE IN THIS SP	PACE		
			3. Date Incorporated or Qualified 12/23/1985			
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21	26		56-1252143	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 25	Zip Co. 30	untry	8. This corporation owes or has paid the curre Personal Property Tax due June 30.	nt year Intangible Yes		
9. Name and Address of Current	Registered Agent	10. Name and Address of New Registered Agent				
PRENTICE-HALL CORPORATION SYSTEM, INC. FIRST FLORIDA BANK BLDG, STE 420 TALLAHASSEE FL 32301		81 Name				
		82 Street Add	2 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.

agont. Ta	an termina with, and becopy the obligations of, bet	31011 007,0000, 110	onde Oteloics:				
SIGNATURE	Signature, typed or printed name of registered agent and fire if appli	icable (NOT	Registered Agent signature	required when (elistating) DAT	<u>-</u>	<del></del>	
12.	OFFICERS AND DIRECTORS		E. Registered Agent signature required when reinstating)  DATE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	P	DELETE	1.1 TITLE		Change	Addition	
NAME	MOODY, DWIGHT		1.2 NAME				
STREET ADDRESS	ONE FIRST UNION CENTER		1.3 STREET ADDRESS				
CITY-ST-ZIP	CHARLOTTE NC	. 4	1.4 CITY-ST-ZIP				
TITLE	VP .	DELETE	2.1 TITLE		Change	Addition	
NAME	LEIGHTON, WARREN	•	2.2 NAME	700002444	767		
STREET ADDRESS	TWO FIRST UNION CENTER NC0200		2.3 STREET ADDRESS	-03/03/9801008			
CITY-ST-ZIP	CHARLOTTE NC		2. 4 CITY - ST - ZIP	***150.00			
TITLE	8	DELETE	3.1 TITLE	Secretary	Change	■ Addition	
NAME	Hathaway, Kent S.	•	3.2 NAME	DAVID Hebner.	- 10		
STREET ADDRESS	ONE FIRST UNION CTR		3.3 STREET ADDRESS	One First Union Cente	u,TW8		
CITY-ST-ZIP	CHARLOTTE NC	.1	3.4. CITY - ST - ZIP	Charlotte, NC 28288			
TITLE	T	DELETE	4.1 TITLE	CFO '	Change	Addition	
NAME	HATCH, JAMES H.	•	4. 2 NAME	JEFF FOX College Stre	.+-	•	
STREET ADDRESS	TWO FIRST UNION CNT 0200		4.3 STREET ADDRESS				
CITY-ST-ZIP	CHARLOTTE NC		4.4 CITY-ST-ZIP	Charlotte, NC 28288			
TITLE	D	☐ DELETE	5.1 TITLE	(00)	☐ Change	Addition Addition	
NAME	CRUTCHFIELD, EDWARD E.		5 2 NAME	MARK Hubbert	11 <del></del>		
STREET ADDRESS	ONE FIRST UNION CENTER		53 STREET ADDRESS	201 South College S	ties!		
CITY-ST-ZIP	CHARLOTTE NC		5.4 CITY-ST-ZIP	Charlotte, NC 2828	8	A	
TITLE	D	☐ DELETE	6.1 TITLE	CC 6	Change	Addition	
NAME	GEORGINS, JOHN		6.2 NAME	C. Rachel Kaemorp		JE.	
STREET ADDRESS	ONE FIRST UNION CENTER		6.3 STREET ADDRESS	201	reet	Y1.7	
OUTLE OF THE	CHARLOTTE NC		O LOUD CT TID	プレー・ル・リー・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	Y X	170	

14. Thereby 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 on an attact/nent with an address.

CIGNATURE:

104-383-574