02142

## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

DOCU	MENT # <b>P28329</b>			-,		`	.0	<b>ט</b> ־		
FIRST UNION SECURITIES, INC.					FILED					
Principal Place of Business Mailing Address					01 JAN 26 PM 1:22					
		1201 HAYS STREET TALLAHASSEE FL 32301 US			SECRETARY OF STATE TALLAHASSEE, FLORIDA					
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State		City & State		4.	FEI Number	34-1542819		$\rightarrow$	plied For t Applicable	
Zip Country		Zip Country		5.	5. Certificate of Status Desired   \$8.75 Additional Fee Required					
	6. Name and Address of Current Re	egistered Agent		7.	Name and Ad	Idress of New Regis		<u> </u>		
CORPORATION SERVICE COMPANY				Name						
1201	I HAYS STREET AHASSEE FL 32301		Street Ad	Street Address (P.O. Box Number is Not Acceptable)						
IALL	ANASSEE FL 32301									
				City FL Zip Code						
	Signature, typed or printed name of registered agent and oration is eligible to satisfy its Intangible requirement and elects to do so.	I title if applicable. (NOTE: Re	• -	0	10. Election	on Campaign Financ			O May Be	
(See crite	ria on back)	Make Check Payable	to Department	of State		Fund Contribution.			to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DI T MAXWELL, ALAN L JR 301 S. COLLEGE ST CHARLOTTE NC 28288-0630	RECTORS  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AΕ	DITIONS/CH	ANGES TO OFFICE		ECTORS Change	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ILARIO, SCOTT L 301 S. COLLEGE ST CHARLOTTE NC 28288-0630	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ne partous strangeren deus	40(	000358		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S POWERS, JAMES F 301 S. COLLEGE ST CHARLOTTE NC 28288-0630	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUMMINGS, STEPHEN E 301 S. COLLEGE ST CHARLOTTE NC 28288-0630	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMPTFUHRER, BARNES W 301 S. COLLEGE ST CHARLOTTE NC 28288-0630	☐ Delete ·	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOLHAGEN, STEVEN W 301 S. COLLEGE ST CHARLOTTE NC 28288-0630	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change <b>SF</b>		
of the cor	certify that the information supplied with the on this report is true portain and the receiver of trustee empower or on an attach or on the an adaress, with an adaress, with	ered to execute this report as r	e exemption state signature shall ha required by Chap	ed in Section ve the same oter 607, Flori	119.07(3)(i), F legal effect as da Statutes; a	Florida Statutes. I furt if made under oath; ind that my name ap	her certify th that I am an pears in Bloo	at the int officer o ck 11 or	formation or director Block 12 if	



ACCOUNT NO. : 072100000032

REFERENCE

AUTHORIZATION

COST LIMIT : \$ 150.00

ORDER DATE: January 26, 2001

ORDER TIME: 11:35 AM

ORDER NO. : 979158-005

CUSTOMER NO: 167868A

CUSTOMER: Lisa P. Clontz, Legal Asst

First Union Corporation

One First Union Center, Nc0630

Legal Division-31st Floor Charlotte, NC 28288-0630

ANNUAL REPORT FILING

NAME: FIRST UNION SECURITIES, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX \_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward - Ext. 1135

EXAMINER'S INITIALS: