

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

PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P32120**
1. Corporation Name

WHEAT FIRST SECURITIES, INC.

Principal Place of Business Mailing Address
One First Union Center
Charlotte, NC 28288

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/11/90

2. Principal Place of Business 21 One First Union Center Suite, Apt. #, etc. 22 City & State 23 Charlotte, NC 28288 Zip 24 28288	2a. Mailing Address 25 One First Union Center Suite, Apt. #, etc. 27 City & State 28 Charlotte, NC 28288 Zip 29 28288
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4. FEI Number 54-0796506	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
Corporation Service Company
1201 Hays Street
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 signature required when resigning) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	Director <input type="checkbox"/> DELETE
NAME	Howard D. Curlett
STREET ADDRESS	One First Union Center
CITY-ST-ZIP	Charlotte, NC 28288-0612
TITLE	Secretary & Director <input type="checkbox"/> DELETE
NAME	Scott L. Ilario
STREET ADDRESS	One First Union Center
CITY-ST-ZIP	Charlotte, NC 28288-0601
TITLE	Treasurer <input type="checkbox"/> DELETE
NAME	Thomas L. Souders
STREET ADDRESS	901 East Byrd Street
CITY-ST-ZIP	Richmond, VA 23219
TITLE	Senior Vice President <input type="checkbox"/> DELETE
NAME	James F. Powers
STREET ADDRESS	One First Union Center
CITY-ST-ZIP	Charlotte, NC 28288-0630
TITLE	Director & President <input type="checkbox"/> DELETE
NAME	Ross M. Annable
STREET ADDRESS	One First Union Center
CITY-ST-ZIP	Charlotte, NC 28288-0600
TITLE	Director <input type="checkbox"/> DELETE
NAME	Mark B. Mahoney
STREET ADDRESS	One First Union Center
CITY-ST-ZIP	Charlotte, NC 28288-0743

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	100002601631 - - 4
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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 in an attachment with an address.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 7/27/98 Daytime Phone 704-374-6611

CR2F034 (10/97)



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 908562 167868A

AUTHORIZATION

Patricia Pizant

COST LIMIT : \$ 550.00

ORDER DATE : July 29, 1998

ORDER TIME : 11:30 AM

ORDER NO. : 908562-005

CUSTOMER NO: 167868A

CUSTOMER: Lisa P. Clontz, Legal Asst
First Union Corporation
One First Union Ctr
Legal Dept. - 31st Floor
Charlotte, NC 28288

ANNUAL REPORT FILING

NAME: WHEAT FIRST SECURITIES, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Robert Turner

EXAMINER'S INITIALS: _____

RECEIVED
98 JUL 29 PM 12:17
DIVISION OF CORPORATION