

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

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P32120

1. Corporation Name
WHEAT, FIRST SECURITIES, INC.

Principal Place of Business
ONE FIRST UNION CENTER
CHARLOTTE NC 28288

Mailing Address
ONE FIRST UNION CENTER
CHARLOTTE NC 28288

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 **1201 Hays St.**
23 **Tallahassee FL**

26 Suite, Apt. #, etc.
27
28 City & State

24 Zip **32301** 25 Country **USA**

29 Zip Country

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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 requires when record drops)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CURLETT, HOWARD D	
STREET ADDRESS	ONE FIRST UNION CENTER	
CITY-ST-ZIP	CHARLOTTE NC 28288-0612	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	ILARIO, SCOTT L	
STREET ADDRESS	ONE FIRST UNION CENTER	
CITY-ST-ZIP	CHARLOTTE NC 28288-0612	
TITLE	T	<input type="checkbox"/> DELETE
NAME	SOUDERS, THOMAS L	
STREET ADDRESS	901 EAST BYRD STREET	
CITY-ST-ZIP	RICHMOND VA 23219	
TITLE	SVP	<input type="checkbox"/> DELETE
NAME	POWERS, JAMES F	
STREET ADDRESS	ONE FIRST UNION CENTER	
CITY-ST-ZIP	CHARLOTTE NC 28288	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	ANNABLE, ROSS M	
STREET ADDRESS	ONE FIRST UNION CENTER	
CITY-ST-ZIP	CHARLOTTE NC 28288	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MAHONEY, MARK B	
STREET ADDRESS	ONE FIRST UNION CENTER	
CITY-ST-ZIP	CHARLOTTE NC 28288	

13.

11 TITLE	DP
12 NAME	Ross M. Annable
13 STREET ADDRESS	One First Union Center
14 CITY-ST-ZIP	Charlotte, NC 28288-0600
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James F. Powers

3/15/99 704-374-6611

FILED

99 MAR 16 PM 12:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/11/1990

4. FEI Number

54-0796506

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax

☐

Yes

☐

No

10. Name and Address of New Registered Agent

CR2E034 (1/98)