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

May 21 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State ·1998 **DMSION OF CORPORATIONS** P96000033420 DOCUMENT # 1. Corporation Name PNC Brokerage Service Corp. Principal Place of Business Mailing Address One PNC Plaza One PNC Plaza DO NOT WRITE IN THIS SPACE Corp.Tax 249 5th Ave. Corp. Tax 249 5th Ave 3. Date Incorporated or Qualified Pittsburgh, PA 15222 Pittsburgh, PA 15222 04/16/96 FEI Number 59-3375108 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Zip Zip Country Country This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CT Corporation Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Road 125 33324 Plantation, FL11. 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent algorature required when reinstating) **OFFICERS AND DIRECTORS** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE X Change 1.2 NAME Michael S. Mortensen NAME STREET ADDRESS 1.3 STREET ADDRESS 249 Fifth Avenue CITY - ST - ZIP 1.4 CITY - ST - ZIP Pittsburgh, PA 15222-2707 TITLE DELETE 2.1 TITLE X Change Addition Thomas R. Moore NAME 2.2 NAME 249 Fifth Avenue STREET ADDRESS 2.3 STREET ADDRESS Pittsburgh, PA 15222-2707 CITY - ST - ZIP 2.4 CITY - ST - ZIP DELETE 3.1 TITLE Addition TITLE X Change Thomas K. Whitford NAME 3.2 NAME 249 Fifth Avenue 3.3 STREET ADDRESS STREET ADDRESS 15222-2707 Pittsburgh, PA CITY - ST - ZIP 3.4 CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE NAME 6.2 NAME -05/22/98---01031----005 STREET ADDRESS **6.3 STREET ADDRESS** ***150.00 CITY - ST - ZIP 6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filling 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 cath; 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

on an attachment with an address.

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

my name appears in Block 12 or Block 13 if changed

FILED

412-762-196 Daytime Phone #