2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 444750

Entity Name: RAYMOND JAMES FINANCIAL, INC.

Current Principal Place of Business:

880 CARILLON PARKWAY ST. PETERSBURG, FL 33716

Current Mailing Address:

880 CARILLON PARKWAY ST. PETERSBURG. FL 33716 US

FEI Number: 59-1517485 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Mar 20, 2019

Secretary of State

5512761496CC

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

NameREILLY, PAUL C.NameBROADER, SHELLEY G.Address880 CARILLON PARKWAYAddress880 CARILLON PARKWAYCity-State-Zip:ST. PETERSBURG FL 33716City-State-Zip:ST. PETERSBURG FL 33716

Title DIRECTOR Title DIRECTOR

Name EDWARDS, JEFFREY N. Name ESTY, BENJAMIN C.

Address 880 CARILLON PARKWAY Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR Title DIRECTOR

NameGATES, ANNENameGODBOLD, FRANCIS S.Address880 CARILLON PARKWAYAddress880 CARILLON PARKWAYCity-State-Zip:ST. PETERSBURG FL 33716ST. PETERSBURG FL 33716

Title DIRECTOR Title DIRECTOR

Name JOHNSON, GORDON L. Name MCGEARY, RODERICK C.

Address 880 CARILLON PARKWAY Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JONATHAN N. SANTELLI

SECRETARY

03/20/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name DUTKOWSKY, ROBERT M. Name STORY, SUSAN N.

Address 880 CARILLON PARKWAY Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR Title PRESIDENT

NameVON ARENTSCHILDT, CHARLESNameCARSON, JOHN C. . JRAddress880 CARILLON PARKWAYAddress880 CARILLON PARKWAYCity-State-Zip:ST. PETERSBURG FL 33716City-State-Zip:ST. PETERSBURG FL 33716

Title SECRETARY Title TREASURER

Name SANTELLI, JONATHAN N. Name SHOUKRY, PAUL M.

Address 880 CARILLON PARKWAY Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716

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