

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000003670

**Entity Name:** UBS ASSET MANAGEMENT (AMERICAS) INC.**Current Principal Place of Business:**ONE NORTH WACKER DR.  
CHICAGO, IL 60606**Current Mailing Address:**ONE NORTH WACKER DR.  
CHICAGO, IL 60606**FEI Number:** 36-3664388**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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

**Officer/Director Detail :**

Title            PRESIDENT, CEO  
Name            FERRI, WILLIAM  
Address        ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title            TREASURER, CFO  
Name            SQUIRES, DAVID S  
Address        ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title            SECRETARY  
Name            KEMPER, MARK F  
Address        ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title            CHIEF COMPLIANCE OFFICER  
Name            ALLESSIE, JOSEPH  
Address        ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title            VP  
Name            GILL, BARRY  
Address        ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title            VP  
Name            LENZA, LISA  
Address        ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title            ASST. SECRETARY  
Name            BUCHHOLZ, KELLY  
Address        ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title            ASST. SECRETARY  
Name            CALHOUN, MICHAEL J  
Address        ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

**Continues on page 2**

*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:** MARK F KEMPER**SECRETARY****04/24/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title ASST. SECRETARY  
Name LAWLOR, WILLIAM  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. SECRETARY  
Name MACGREGOR, WILLIAM  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. SECRETARY  
Name SANDERS, ERIC  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. SECRETARY  
Name WELLER, KEITH  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. TREASURER  
Name FALLY, HYESEON  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. TREASURER  
Name FORSCHINO, BRIAN  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. TREASURER  
Name PUGLIA, SARAH  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. SECRETARY  
Name LEE, TAMMIE  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. SECRETARY  
Name LINDAUER, JOSHUA  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. SECRETARY  
Name STACEY, PHILIP  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. SECRETARY  
Name WILEY, JENNIFER  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. TREASURER  
Name ISRAEL, JOSEPH  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. TREASURER  
Name MCKIBBEN, CHARLES  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606

Title ASST. TREASURER  
Name NAYMAN, LAURENCE  
Address ONE NORTH WACKER DR.  
City-State-Zip: CHICAGO IL 60606