

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000004193

**Entity Name:** E\*TRADE FINANCIAL CORPORATE SERVICES, INC.**Current Principal Place of Business:**4005 WINDWARD PLAZA DRIVE  
ALPHARETTA, GA 30005**Current Mailing Address:**4005 WINDWARD PLAZA DRIVE  
ALPHARETTA, GA 30005 US**FEI Number: 77-0054242****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	PRES, DIRECTOR
Name	HUTCHISON, PAUL
Address	4005 WINDWARD PLAZA DRIVE
City-State-Zip:	ALPHARETTA GA 30005

Title	SEC
Name	SHER, LORI
Address	671 NORTH GLEBE ROAD
City-State-Zip:	ARLINGTON VA 22203

Title	CFO
Name	TURNER, CHAD
Address	4005 WINDWARD PLAZA DRIVE
City-State-Zip:	ALPHARETTA GA 30005

Title	DIRECTOR
Name	NAVTEJ, NANDRA
Address	4005 WINDWARD PLAZA DRIVE
City-State-Zip:	ALPHARETTA GA 30005

Title	DIRECTOR
Name	FOLEY, MICHAEL
Address	4005 WINDWARD PLAZA DRIVE
City-State-Zip:	ALPHARETTA GA 30005

Title	VICE PRESIDENT
Name	DOGGETT, WALTER
Address	4005 WINDWARD PLAZA DRIVE
City-State-Zip:	ALPHARETTA GA 30005

*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: LORI SHER****SECRETARY****04/29/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date