

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213553888

1.) CORPORATION NAME:

SUNTRUST ROBINSON HUMPHREY, INC.

DUE DATE: **12/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1320516**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

TN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: C/O SHEILA J. JOBE
3333 PEACHTREE RD, NE, AFC, SOUTH TOWER 9THFL

CITY/ST/ZIP: ATLANTA, GA 30326

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	GERARD J O'MEARA JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3333 PEACHTREE RD, NE		
CITY/ST/ZIP/CO:	AFC, SOUTH TOWER, 6TH FLOOR ATLANTA, GA 30326		

NAME:	DAVID T BLOOM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	3333 PEACHTREE RD, NE		
CITY/ST/ZIP/CO:	AFC, SOUTH TOWER 9TH FLOOR ATLANTA, GA 30326		

NAME:	ANAND B. DUTTA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	MGN DIRECTOR		
ADDRESS:	303 PEACHTREE STREET, NE		
CITY/ST/ZIP/CO:	11TH FLOOR ATLANTA, GA 30308		

NAME:	THOMAS A. KICAK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CCO		
ADDRESS:	3333 PEACHTREE RD, NE		
CITY/ST/ZIP/CO:	AFC, SOUTH TOWER, 9TH FLOOR ATLANTA, GA 30326		

NAME:	DONALD R MORRIS, JR.	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	303 PEACHTREE STREET		
CITY/ST/ZIP/CO:	PLAZA FLOOR 25 ATLANTA, GA 30308		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WOODRUFF A POLK ASST SECRETARY 3333 PEACHTREE ROAD, NE AFC, SOUTH TOWER, 9TH FLOOR ATLANTA, GA 30326	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT B. ROSENBERGER HEAD OF OPERATI 303 PEACHTREE STREET, NE SUNTRUST PLAZA, 25TH FLOOR ATLANTA, GA 30308	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN N. GREGG CHAIRMAN 3333 PEACHTREE RD, NE AFC, SOUTH TOWER, 10TH FLOOR ATLANTA, GA 30326	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK A. CHANCY DIRECTOR 303 PEACHTREE STREET, NE SUITE 3000 ATLANTA, GA 30308	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HUGH S CUMMINS III DIRECTOR 303 PEACHTREE ST. NE SUNTRUST PLAZA, 30TH FLOOR ATLANTA, GA 30308	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALEEM GILLANI DIRECTOR 303 PEACHTREE STREET, NE SUITE 3000 ATLANTA, GA 30308	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JO D. KEELER DIRECTOR 3333 PEACHTREE RD, NE AFC, SOUTH TOWER, 10TH FLOOR ATLANTA, GA 30326	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL G. MAZA DIRECTOR 3333 PEACHTREE ROAD, NE AFC, SOUTH TOWER, 10TH FLOOR ATLANTA, GA 30326	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	R. TODD SHUTLEY DIRECTOR 3333 PEACHTREE ROAD, NE AFC, SOUTH TOWER 10TH FLOOR ATLANTA, GA 30326	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH M. THOMPSON DIRECTOR 3333 PEACHTREE RD, NE AFC, SOUTH TOWER, 10TH FLOOR ATLANTA, GA 30326	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	MICHAEL A. WHEELER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3333 PEACHTREE RD, NE AFC, SOUTH TOWER, 11TH FLOOR		
CITY/ST/ZIP/CO:	ATLANTA, GA 30326		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ DAVID T BLOOM	DAVID T BLOOM, SECRETARY	11/8/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.