

SCC eFile

2015 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

215545438

1.) CORPORATION NAME:

**SUNTRUST ROBINSON HUMPHREY, INC.**

DUE DATE: **12/31/2015**

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**

**RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**TN**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: C/O TAMMIE L. MOORE  
3333 PEACHTREE RD, NE, AFC,SOUTH TOWER 10THFL

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:	JOHN N. GREGG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	3333 PEACHTREE RD, NE		
CITY/ST/ZIP/CO:	AFC, SOUTH TOWER, 10TH FLOOR ATLANTA, GA 30326		

NAME:	JO D. KEELER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3333 PEACHTREE RD, NE		
CITY/ST/ZIP/CO:	AFC, SOUTH TOWER, 10TH FLOOR ATLANTA, GA 30326		

NAME:	MICHAEL G. MAZA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3333 PEACHTREE ROAD, NE		
CITY/ST/ZIP/CO:	AFC, SOUTH TOWER, 10TH FLOOR ATLANTA, GA 30326		

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:	R. TODD SHUTLEY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3333 PEACHTREE ROAD, NE		
CITY/ST/ZIP/CO:	AFC, SOUTH TOWER 10TH FLOOR ATLANTA, GA 30326		

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: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL A. WHEELER DIRECTOR 3333 PEACHTREE RD, NE AFC, SOUTH TOWER, 11TH FLOOR ATLANTA, GA 30326	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID T BLOOM SECRETARY 3333 PEACHTREE RD, 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:	ANAND B. DUTTA MGN DIRECTOR 303 PEACHTREE STREET, NE 11TH FLOOR ATLANTA, GA 30308	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS A. KICAK CCO 3333 PEACHTREE RD, 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:	DONALD R MORRIS, JR. CFO 303 PEACHTREE STREET PLAZA FLOOR 25 ATLANTA, GA 30308	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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:	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:	ALEEM GILLANI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	303 PEACHTREE STREET, NE		
CITY/ST/ZIP/CO:	SUITE 3000 ATLANTA, GA 30308		

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	12/28/2015
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.