

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000990

Entity Name: BANCWEST INVESTMENT SERVICES, INC.

Current Principal Place of Business:

13220 CALIFORNIA STREET
OMAHA, NE 68154

Current Mailing Address:

1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

FEI Number: 13-3618472

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. 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

Officer/Director Detail :

Title TREASURER
Name STASTNY, ROBERT
Address 13220 CALIFORNIA STREET
City-State-Zip: OMAHA NE 68154

Title ASST. SECRETARY
Name WYATT, VAWN P
Address 180 MONTGOMERY STREET
 ATTN: BOW LEGAL DEPT
City-State-Zip: SAN FRANCISCO CA 94104

Title SECRETARY
Name HAWKINS, STEVEN
Address 300 S. GRAND AVE
City-State-Zip: LOS ANGELES CA 90071

Title DIRECTOR/CHAIRMAN
Name BAHNKEN, JOHN
Address 180 MONTGOMERY STREET
 25TH FLOOR
City-State-Zip: SANFRANCISCO CA 94104

Title DIRECTOR
Name HARRISON, ROBERT
Address 999 BISHOP STREET
City-State-Zip: HONOLULU HI 96813

Title DIRECTOR
Name DAYAL, DUKE
Address 180 MONTGOMERY STREET
 25TH FLOOR
City-State-Zip: SAN FRANCISCO CA 94104

Title DIRECTOR
Name HARMENING, ANDY
Address 180 MONTGOMERY STREET
 25TH FLOOR
City-State-Zip: SAN FRANCISCO CA 94104

Title DIRECTOR
Name ARIZUMI, ALAN
Address 999 BISHOP STREET
City-State-Zip: HONOLULU HI 96813

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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: VAWN P WYATT

ASSISTANT SECRETARY 03/16/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name OYADOMORI, MARK
Address 98-1071 MOANALUA ROAD
City-State-Zip: AIEA HI 96701

Title DIRECTOR
Name MORRIS, JOHN
Address 180 MONTGOMERY STREET
25TH FLOOR
City-State-Zip: SAN FRANCISCO CA 94104

Title PRESIDENT, DIRECTOR
Name NIEMI, DALE
Address 4400 MACARTHUR BLVD
SUITE 400
City-State-Zip: NEWPORT BEACH CA 94104

Title DIRECTOR
Name CHAR, NEILL
Address 999 BISHOP STREET
City-State-Zip: HONOLULU HI 96813