

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000084921

**FILED**  
**Mar 10, 2010**  
**Secretary of State**

**Entity Name:** RAYMOND JAMES RESEARCH SERVICES, L.L.C.

**Current Principal Place of Business:**

880 CARILLON PARKWAY  
ST. PETERSBURG, FL 33716

**New Principal Place of Business:**

**Current Mailing Address:**

880 CARILLON PARKWAY  
ST. PETERSBURG, FL 33716

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: TROCIN, JEFFREY E  
Address: 880 CARILLON PARKWAY  
City-St-Zip: ST. PETERSBURG, FL 33716

Title: MGRM  
Name: ANASTASI, ROBERT P  
Address: 880 CARILLON PARKWAY  
City-St-Zip: ST. PETERSBURG, FL 33716

Title: MGRM  
Name: CRITCHLOW, JOHN N  
Address: 880 CARILLON PARKWAY  
City-St-Zip: ST. PETERSBURG, FL 33716

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JEFFREY E TROCIN

MGRM

03/10/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date