2001 UNIFORM BUSINESS REPORT (UBR)

000636 AF

DOCUMENT # M99000001304

1. Entity Name

AXA ADVISORS, LLC

FILED

01 FEB 27 PM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1290 AVENUE OF THE AMERICAS NEW YORK NY 10104	1290 AVENUE OF THE AMERICAS NEW YORK NY 10104

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 13-4071393 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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-03/06/01--01050--007
*****50.00 *****50.00

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BISHOP, DERRY E 1290 AVENUE OF THE AMERICAS NEW YORK NY 10104	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR RICHARD V. SILVER 1290 AVENUE OF THE AMERICAS NEW YORK, NEW YORK 10104	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BLITZ, HARVEY E 1290 AVENUE OF THE AMERICAS NEW YORK NY 10104	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR RICHARD A. DAVIES 1345 AVENUE OF THE AMERICAS NEW YORK, NEW YORK 10104	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR LAUGHLIN, MICHAEL J 1345 AVENUE OF THE AMERICAS NEW YORK NY 10105	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR MARK R. WUTT 1290 AVENUE OF THE AMERICAS NEW YORK, NEW YORK 10104	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR MARTIN, MICHAEL S 1290 AVENUE OF THE AMERICAS NEW YORK NY 10104	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR MCGUNAGLE, G. PATRICK 1290 AVENUE OF THE AMERICAS NEW YORK NY 10104	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E083 (11/00)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: SIGNATURE REQUIRED MANAGER 2/21/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #