2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT

P0000005603

1. Entity Name

TRADESTATION GROUP, INC.



FILED Apr 14, 2003 8:00 am Secretary of State 04-14-2003 90058 041 ***158.75

Principal Place of Business 8050 SW 10TH ST SUITE 4000 PLANTATION FL 33324			Mailing Address 8050 SW 10TH ST SUITE 4000 PLANTATION FL 33324									
2. Principal F	Place of Busin	ess	3. Mailing Address					4 18811981	ESE MOSILI GREELI MOSILI DA	FIL MULTI OCIUS BU	11 81 B 111 8 B 1151	A ROLLO CALLA CARA
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City	& State			4.	4. FEI Number 65-0977576				pplied For ot Applicable
Zip Country			Zip	Zip Cour			5.	. Certificate of	Status Desired		8.75 Ad ee Require	lditional
	6. Name	and Address of Current	Registere	ed Agent ~			···· · · · · · · · · · · · · · · · ·	-Name and A	ddress of New R	egistered A	gent	
STONE, MARC J 8050 SW 10TH ST						Name Street A	ddress (P.O.	Box Number is	s Not Acceptable	·)		
SUITE 4000									-			
PLANTATI	ON FL 333	24								FL	Zip Cod	de
	named entity ions of regist	submits this statement for ered agent;	r the purp	ose of changing its	registere	ed office o	r registered a	igent, or both,	in the State of Flo	orida. I am fa	miliar with,	and accept
SIGNATURE.	Signature, typed	or printed name of registered agent	and title if app	olicable. (NOTE	: Registere	d Agent signat	ture required when	reinstating)	**	DATE		<u> </u>
After	May 1, 200	FEE IS \$150.00 Fee will be \$550.00 Florida Department o	f State						ion Campaign Fin Fund Contribution			00 May Be d to Fees
10.		OFFICERS AND	DIRECTO	RS	11.			DDITIONS/CH	HANGES TO OFF	ICERS AND [DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO CRUZ, WII 8050 SW PLANTATI			☐ Delete			8050		UE STREET, SU FL 33	THE 40		∠ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO CRUZ, RA 8050 SW PLANTATI			☐ Delete			VIT DAVID 8050		HMAN H STREET		□ Change € 40 0	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SREDNI, S 8050 SW PLANTATIO	ALOMON	~	Delete -			D/P				Shange .	☐ Addition~
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WRIGHT, 0 8050 SW PLANTATIO			☐ Delete	_						☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	8050 SW	, Stephen C Ioth St Dn Fl 33324		☐ Delete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY_ST_ZIP	D FIPPS, MIC 8050 SW			☐ Delete						1	Change	Addition

12. I hereby certify that the information supplied with this filling 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (10/02)