

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000003798

Entity Name: GLOBAL FINANCIAL ADVISORY, LLC

Current Principal Place of Business:

501 N CATTLEMAN RD, SUITE 106
SARASOTA, FL 34232

Current Mailing Address:

1655 GRANT STREET, 10TH FLOOR
CONCORD, CA 94520 US

FEI Number: 81-3933117

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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

Authorized Person(s) Detail :

Title MBR
Name GLOBAL FINANCIAL PRIVATE CAPITAL, LLC
Address 501 N CATTLEMAN RD, SUITE 106
City-State-Zip: SARASOTA FL 34232

Title MANAGER
Name ZYLA, GARY G
Address 1655 GRANT STREET, 10TH FLOOR
City-State-Zip: CONCORD CA 94520

Title TREASURER
Name ZYLA, GARY G
Address 1655 GRANT STREET, 10TH FLOOR
City-State-Zip: CONCORD CA 94520

Title VP
Name WALKER, JEFF
Address 501 N CATTLEMAN RD, SUITE 106
City-State-Zip: SARASOTA FL 34232

Title MANAGER
Name GOLDMAN, CHARLES G
Address 1655 GRANT STREET, 10TH FLOOR
City-State-Zip: CONCORD CA 94520

Title PRESIDENT
Name ANGUS, TED F
Address 1655 GRANT STREET, 10TH FLOOR
City-State-Zip: CONCORD CA 94520

Title SECRETARY
Name MCKEAN, NAOMI J
Address 1655 GRANT STREET, 10TH FLOOR
City-State-Zip: CONCORD CA 94520

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NAOMI J MCKEAN

SECRETARY

01/30/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date