2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# F03000001329

Entity Name: NEMCO BROKERAGE, INC.

Current Principal Place of Business:

360 LEXINGTON AVENUE, FL2
NEW YORK, NY 10017

New Principal Place of Business:

340 MADISON AVENUE
21ST FLOOR
NEW YORK, NY 10173

Current Mailing Address:

C/O NFP, 500 W. MADISON STREET
SUITE 2400
CHICAGO, IL 60661

New Mailing Address:

FEI Number: 22-3698782 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: COOPER, STEPHEN A
Address: 360 LEXINGTON AVENUE, FL2
City-St-Zip: NEW YORK, NY 10017

Title: D ( ) Delete
Name: WALKER, CYRUS
Address: 360 LEXINGTON AVENUE, FL2
City-St-Zip: NEW YORK, NY 10017

Title: V ( ) Delete
Name: LIESER, LORI M
Address: 500 W. MADISON STREET, SUITE 2400
City-St-Zip: CHICAGO, IL 60661

Title: D ( ) Delete
Name: ZUCCARO, ROBERT S
Address: 787 SEVENTH AVENUE, 11TH FLOOR
City-St-Zip: NEW YORK, NY 10019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: COOPER, STEPHEN A
Address: 340 MADISON AVENUE, 21ST FLOOR
City-St-Zip: NEW YORK, NY 10173

Title: D (X) Change ( ) Addition
Name: WALKER, CYRUS
Address: 340 MADISON AVENUE, 21ST FLOOR
City-St-Zip: NEW YORK, NY 10173

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: SCHNEIDER, BRETT
Address: 340 MADISON AVENUE, 19TH FLOOR
City-St-Zip: NEW YORK, NY 10173

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LORI M. LIESER V 04/13/2009

Electronic Signature of Signing Officer or Director — Date