

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007275

FILED  
Jul 06, 2007  
Secretary of State

Entity Name: JESUP & LAMONT SECURITIES CORPORATION

**Current Principal Place of Business:**

650 5TH AVENUE  
NEW YORK, NY 10019

**New Principal Place of Business:**

**Current Mailing Address:**

650 5TH AVENUE  
NEW YORK, NY 10019

**New Mailing Address:**

FEI Number: 91-1690946

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCMULLIN, PETER  
2102 N.W. CORPORATE BLVD., BOCA CORP. CENT  
ER 1  
BOCA RATON, FL 33431 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: CD ( ) Delete  
Name: DEGROAT, STEPHEN J  
Address: 650 5TH AVENUE  
City-St-Zip: NEW YORK, NY 10019

Title: PD ( ) Delete  
Name: MORENO, WILLIAM F  
Address: 650 5TH AVENUE, 3RD FLOOR  
City-St-Zip: NEW YORK, NY 10019

Title: ST ( ) Delete  
Name: CASSIDY, TIMOTHY  
Address: 650 5TH AVENUE, 3RD FLOOR  
City-St-Zip: NEW YORK, NY 10019

Title: D ( ) Delete  
Name: MIDDLEMAS, GEORGE  
Address: 225 WASHINGTON STREET, SUITE 1500  
City-St-Zip: CHICAGO, IL 60606

Title: D ( ) Delete  
Name: AYSSEH, ALFRED  
Address: 9 SHEILDS LANE  
City-St-Zip: DARIEN, CT 06820

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: TIM CASSIDY

VP

07/06/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date