

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000414

FILED
Jan 04, 2007
Secretary of State

Entity Name: MACQUARIE SECURITIES (USA) INC.

Current Principal Place of Business:

125 W 55TH ST 22ND FL
NEW YORK, NY 10019

New Principal Place of Business:

Current Mailing Address:

125 W 55TH ST 22ND FL
NEW YORK, NY 10019

New Mailing Address:

FEI Number: 98-0141094

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T 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: DP () Delete
Name: SULLIVAN, LUKE
Address: 125 W 55TH ST 22ND FL
City-St-Zip: NEW YORK, NY 10019

Title: VC () Delete
Name: BLEACH, MURRAY
Address: 125 W 55TH ST 22ND FL
City-St-Zip: NEW YORK, NY 10019

Title: D () Delete
Name: LAIDLAW, ROY
Address: MACQUARIE BANK LIMITED NO 1 MARTIN PL
City-St-Zip: SYDNEY, NSW 2000 , AUSTRALIA,

Title: D () Delete
Name: MOFFAT, KIERAN
Address: 125 W 55TH ST 22ND FL
City-St-Zip: NEW YORK, NY 10019

Title: ST () Delete
Name: GLYNN, MICHAEL
Address: 125 W 55TH ST 22ND FL
City-St-Zip: NEW YORK, NY 10019

Title: () Delete
Name:
Address:
City-St-Zip:

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: S (X) Change () Addition
Name: RIVERA, CHRISTINE
Address: 125 W 55TH ST 22ND FL
City-St-Zip: NEW YORK, NY 10019

Title: T () Change (X) Addition
Name: JOHN, MULLIN
Address: 125 W 55TH ST 22ND FL
City-St-Zip: NEW YORK, NY 10019

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN B. MULLIN

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01/04/2007

Electronic Signature of Signing Officer or Director

Date