2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005122

Entity Name: MOLONEY SECURITIES CO., INC.

FILED Feb 06, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	RETT PKWY. STER, MO 630				
Current Mailing Address:			New Maili	New Mailing Address:	
	RETT PKWY. STER, MO 630				
FEI Number: 43-1714327 FEI Number Applied For ()			FEI Number Not Appl	Number Not Applicable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
	SSELL I GALGANO W PRINGS, FL 3				
The above in the State		submits this statement for the pu	rpose of changing i	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Agen	t	Date	
Election Can	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	RUSH, ROBER	T PKWY. DR., #300	Title: Name: Address: City-St-Zip:	C (X) Change () Addition RUST, ROBERT 13537 BARRETT PKWY. DR., #300 MANCHESTER, MO 63021	
Title: Name: Address: City-St-Zip:	MOLONEY, ED	T PKWY. DR., #300	Title: Name: Address: City-St-Zip:	PRES (X) Change () Addition MOLONEY, EDWARD J 13537 BARRETT PKWY. DR., #300 MANCHESTER, MO 63021	
Title: Name: Address: City-St-Zip:	ZITZMANN, RAÍ	T PKWY. DR., #300	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition ZITZMANN, RALPH 13537 BARRETT PKWY. DR., #300 MANCHESTER, MO 63021	
Title: Name: Address: City-St-Zip:	KAYS, KENNET	T PKWY. DR., #300	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KAY, KENNETH	T PKWY. DR., #300	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () BETZELLBERG 7101 COLLEGE OVERLAND PA	E BLVD., #1610	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: EDWARD J. MOLONEY PRES 02/06/2009