

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K78218

FILED
Apr 14, 2009
Secretary of State

Entity Name: SANDLER & TRAVIS TRADE ADVISORY SERVICES, INC.

Current Principal Place of Business:

% THOMAS G. TRAVIS
5200 BLUE LAGOON DRIVE, SUITE #600
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

% THOMAS G. TRAVIS
5200 BLUE LAGOON DRIVE, SUITE #600
MIAMI, FL 33126

New Mailing Address:

FEI Number: 52-1356386 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRAVIS, THOMAS G.
5200 BLUE LAGOON DR. #600
MIAMI, FL 33126 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: VD () Delete
Name: TRAVIS, THOMAS G.
Address: 5200 BLUE LAGOON DR 600
City-St-Zip: MIAMI, FL

Title: TD () Delete
Name: SANDLER, GILBERT LEE
Address: 5200 BLUE LAGOON DR 600
City-St-Zip: MIAMI, FL

Title: SVD () Delete
Name: ROSENBERG, LEONARD L.
Address: 5200 BLUE LAGOON DR 600
City-St-Zip: MIAMI, FL

Title: P () Delete
Name: SCHAEFFER, R
Address: 1300 EPNN AVE
City-St-Zip: WASHINGTON, DC 20004

Title: V () Delete
Name: D' AMICO, ALFRED J
Address: 36555 CORPORATE DR STE 400
City-St-Zip: FARMINGTON, MI 48331

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: LEONARD L. ROSENBERG

SVD

04/14/2009

Electronic Signature of Signing Officer or Director

_____ Date