


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 10, 2004 8:00 am
Secretary of State

05-10-2004 90014 018 ***150.00

DOCUMENT # M03000003197

1. Entity Name
 PRUCO SECURITIES, LLC



Principal Place of Business 213 WASHINGTON ST. NEWARK, NJ 07102	Mailing Address 213 WASHINGTON ST. NEWARK, NJ 07102
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24070011



04272004 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 22-1211670	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AVERY, JAMES J 213 WASHINGTON ST. NEWARK, NJ 07102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FRAWLEY, KEVIN B 213 WASHINGTON ST. NEWARK, NJ 07102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GORDON, JOHN 213 WASHINGTON ST. NEWARK, NJ 07102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GREENE, JOHN W 213 WASHINGTON ST. NEWARK, NJ 07102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOWARD, JOHN M 213 WASHINGTON ST. NEWARK, NJ 07102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ODENATH, DAVID R 213 WASHINGTON ST. NEWARK, NJ 07102

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Janice Pavlou, Janice Pavlou 4/27/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #