

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000002547

FILED
Apr 17, 2009
Secretary of State

Entity Name: THE NASDAQ STOCK MARKET LLC

Current Principal Place of Business:

ONE LIBERTY PLAZA
NEW YORK, NY 10006

New Principal Place of Business:

Current Mailing Address:

ONE LIBERTY PLAZA
NEW YORK, NY 10006

New Mailing Address:

ONE LIBERTY PLAZA
TAX DEPT.
NEW YORK, NY 10006 US

FEI Number: 42-1703009

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BALDWIN, H FURLONG
Address: ONE LIBERTY PLAZA
City-St-Zip: NEW YORK, NY 10006

Title: MGR () Delete
Name: CASEY, MICHAEL
Address: ONE LIBERTY PLAZA
City-St-Zip: NEW YORK, NY 10006

Title: MGR () Delete
Name: HEALY, PATRICK
Address: ONE LIBERTY PLAZA
City-St-Zip: NEW YORK, NY 10006

Title: MGR () Delete
Name: HUTCHINS, GLENN
Address: ONE LIBERTY PLAZA
City-St-Zip: NEW YORK, NY 10006

Title: MGR () Delete
Name: JANOW, MERIT
Address: ONE LIBERTY PLAZA
City-St-Zip: NEW YORK, NY 10006

Title: MGR () Delete
Name: MARKESE, JOHN DR.
Address: ONE LIBERTY PLAZA
City-St-Zip: NEW YORK, NY 10006

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: COLEMAN, DANIEL
Address: ONE LIBERTY PLAZA
City-St-Zip: NEW YORK, NY 10006

Title: MGR (X) Change () Addition
Name: CONCANNON, CHRIS
Address: ONE LIBERTY PLAZA
City-St-Zip: NEW YORK, NY 10006

Title: MGR (X) Change () Addition
Name: GREIFELD, ROBERT
Address: ONE LIBERTY PLAZA
City-St-Zip: NEW YORK, NY 10006

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 is true and accurate and that my electronic 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: MICHAEL CARAMICO

VP

04/17/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date