04-06-2005 90025 010 ****50.00
M97000000757

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M97000000757

1. Entity Name
SCHONFELD SECURITIES, LLC

05 APR 21 PM 3:51

MJH

Principal Place of Business	Mailing Address
7284 W PALMETTO PARK RD STE 301 BOCA RATON, FL 33433	7284 W PALMETTO PARK RD STE 301 BOCA RATON, FL 33433

DO NOT WRITE IN THIS SPACE

01112005 No Chg-LLC CR2E083 (10/03) 4/21

4. FEI Number
11-3315714

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$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

DO NOT WRITE IN THIS SPACE

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR MEMBER
NAME	SCHONFELD, STEVEN B
STREET ADDRESS	20 WHITNEY LANE
CITY-ST-ZIP	OLD WESTBURY, NY 11568
TITLE	MANAGER
NAME	SCHONFELD GROUP HOLDINGS LLC
STREET ADDRESS	ONE JERICHO PLAZA
CITY-ST-ZIP	JERICHO, NY 11753
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: STEVEN SCHONFELD 3/30/2005 (516) 832-0202
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #