

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000001463

1. Entity Name

JANNEY MONTGOMERY SCOTT LLC

Principal Place of Business

1801 MARKET STREET
PHILADELPHIA PA 19103

Mailing Address

1801 MARKET STREET
PHILADELPHIA PA 19103

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

FILED

01 AUG 27 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number 23-0731260

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State
Due By September 26, 2001

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-08/29/01--01090--016

*****50.00 *****50.00

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE NAME MGR
STREET ADDRESS RUDOLPH CHARLES SANDERS
CITY-ST-ZIP 505 ORIOLE LANE
VILLANOVA PA 19085 ☐ Delete

TITLE NAME Manager
STREET ADDRESS Richard A. Thornton
CITY-ST-ZIP 214 Barnsboro Road
Sewell, NJ 08080 ☐ Change ☒ Addition

TITLE NAME MGR
STREET ADDRESS CHARLES BECKWITH COOK, JR.
CITY-ST-ZIP RFD #1-BOX 187
CENTER HARBOR NH 03226 ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME MGR
STREET ADDRESS NORMAN-TAYLOR WILDE, JR.
CITY-ST-ZIP 306 WOOD SPRING ROAD
GWYNEDD VALLEY PA 19437 ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME MGR
STREET ADDRESS RONALD MICHAEL BERARDINO
CITY-ST-ZIP 27 HOMESTEAD AVENUE, GARDEN CITY
LONG ISLAND NY 11530 ☒ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME MGR
STREET ADDRESS DAVID JOHN CUNNINGHAM
CITY-ST-ZIP 519 ANDOVER ROAD
WILMINGTON DE 19803 ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME MGR
STREET ADDRESS JOHN JOSEPH GRAY
CITY-ST-ZIP 612 CREEK LANE
WILMINGTON DE 19803 ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: *Richard A. Thornton* SIGNATURE OF REGISTERED AGENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

8-21-01 (215)665-6000

Date

Daytime Phone #

CR2E083 (5/01)

STATE CHECK HERE