

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000001463

FILED
Feb 16, 2011
Secretary of State

Entity Name: JANNEY MONTGOMERY SCOTT LLC

Current Principal Place of Business:

ATTN: LEGAL DEPARTMENT
1801 MARKET STREET, 8TH FLOOR
PHILADELPHIA, PA 19103 US

New Principal Place of Business:

Current Mailing Address:

ATTN: LEGAL DEPARTMENT
1801 MARKET STREET, 8TH FLOOR
PHILADELPHIA, PA 19103 US

New Mailing Address:

FEI Number: 23-0731260

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
Name: MCDONNELL, EILEEN
Address: 600 DRESHER ROAD
City-St-Zip: HORSHAM, PA 19044 US

Title: MGR
Name: SCHEVE, TIMOTHY C
Address: 1801 MARKET STREET
City-St-Zip: PHILADELPHIA, PA 19103 US

Title: MGR
Name: LOMBARD, JEROME F JR
Address: 1801 MARKET STREET
City-St-Zip: PHILADELPHIA, PA 19103

Title: MGR
Name: JOHN, MAINE D
Address: 1801 MARKET STREET
City-St-Zip: PHILADELPHIA, PA 19103 US

Title: MGR
Name: CROONQUIST, G. THOMAS JR
Address: 505 MAIN ST - 3RD FLOOR
City-St-Zip: HACKENSACK, NJ 07602 US

Title: MGR
Name: ESKIN, MARK R
Address: 1801 MARKET ST
City-St-Zip: PHILADELPHIA, PA 19103 US

I hereby 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: JEROME F. LOMBARD, JR.

MGR

02/16/2011

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