

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90168 037 ***150.00

U.S. FORM 11

DOCUMENT # P29872
 1. Entity Name
TRANSAMERICA FINANCIAL ADVISORS, INC.

Principal Place of Business Mailing Address
1209 ORANGE STREET **1209 ORANGE STREET**
WILMINGTON DE 19801 **WILMINGTON DE 19801**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number: **95-2565208** Applied For: Not Applicable
 5. Certificate of Status Desired: **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
 Name: _____
 Street Address (P.O. Box Number is Not Acceptable): _____
 City: _____ **FL** Zip Code: _____

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

8. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROWN, SANDRA C 1150 S OLIVE STREET, STE T-25 LOS ANGELES CA 90015 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TRIVERS, DAN S. 1150 SOUTH OLIVE LOS ANGELES CA <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAN S. TRIVERS **Dan S. Trivers** **2-4-02** **213-741-7702**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)



Attachment DOC#P29872

Transamerica 500745
Financial Advisors, Inc.
A Registered Broker/Dealer
1150 South Olive Street
Los Angeles, CA 90015
(213) 741-7702

February 05, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: 2002 Uniform Business Report

Dear Sir or Madam:

Enclosed please find our 2002 Uniform Business Report (UBR) and a check for the fee due.

An extra copy of this letter and a prepaid envelope are enclosed for your convenience in acknowledging receipt.

Sincerely,

A handwritten signature in cursive script that reads "Anna-Marie Chavez-Rey".

Anna-Marie Chavez-Rey
Senior Licensing Specialist



Attachment
Doc# P29872/500745

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Financial Advisors, Inc.
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COPY

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