

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

93 APR 28 PM 6:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P37645**

(9)

1. Corporation Name

BULL & BEAR SECURITIES, INC.

Principal Place of Business

11 HANOVER SQUARE
NEW YORK NY 10005

Mailing Address

11 HANOVER SQUARE
NEW YORK NY 10005

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/21/1992

3a. Date of Last Report

04/20/1994

4. FEI Number

13-3207082

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

WALKER, IAN G.
200 NE 20TH STREET, #205A
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name

MORRISSEY, PHILIP F.

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

395 EAST PALMETTO PARK ROAD

83

84 City

BOCA RATON

FL

85 Zip Code

33432

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named Corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

PHILIP F. MORRISSEY

(NOTE: Registered Agent signature required when changing)

DATE

4/24/95

12. OFFICERS AND DIRECTORS

TITLE

OWN

NAME

WINMILL, BASSETT S.

STREET ADDRESS

11 HANOVER SQUARE

CITY - ST - ZIP

NEW YORK NY

TITLE

VCD

NAME

ANDERSON, ROBERT D.

STREET ADDRESS

11 HANOVER SQUARE

CITY - ST - ZIP

NEW YORK NY

TITLE

DP

NAME

WINMILL, MARK C.

STREET ADDRESS

11 HANOVER SQUARE

CITY - ST - ZIP

NEW YORK NY

TITLE

CD

NAME

WINMILL, THOMAS B.

STREET ADDRESS

11 HANOVER SQUARE

CITY - ST - ZIP

NEW YORK NY

TITLE

TCA

NAME

MOY, ROBERT J.

STREET ADDRESS

11 HANOVER SQUARE

CITY - ST - ZIP

NEW YORK NY

TITLE

VP

NAME

DEMPSEY, JAMES J.

STREET ADDRESS

11 HANOVER SQUARE

CITY - ST - ZIP

NEW YORK NY

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

TCA
DEAN, WILLIAM K.
11 HANOVER SQUARE
NEW YORK, N.Y.

VP
MITCHELL II, JAMES R.
11 HANOVER SQUARE
NEW YORK NY

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

THOMAS B. WINMILL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/95

212-785-0900