

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000052772

Entity Name: TRADESTATION CRYPTO, INC.**Current Principal Place of Business:**8050 SW 10TH STREET
PLANTATION, FL 33324**Current Mailing Address:**8050 SW 10TH STREET
ST 2000
PLANTATION, FL 33324 US**FEI Number:** 83-0923587**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 US*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**Officer/Director Detail :**

Title	PRESIDENT, DIRECTOR
Name	BARTLEMAN, JOHN
Address	8050 SW 10TH STREET SUITE 2000
City-State-Zip:	PLANTATION FL 33324

Title	SECRETARY
Name	STONE, MARC
Address	8050 SW 10TH STREET SUITE 2000
City-State-Zip:	PLANTATION FL 33324

Title	CHIEF FINANCIAL OFFICER AND TREASURER
Name	VANCE, GREG
Address	8050 SW 10TH STREET SUITE 2000
City-State-Zip:	PLANTATION FL 33324

Title	GENERAL COUNSEL, ASSISTANT SECRETARY
Name	SCHUBAUER, DAVID
Address	8050 SW 10TH STREET SUITE 2000
City-State-Zip:	PLANTATION FL 33324

Title	DIRECTOR, COO
Name	KOROTKIY, PETER
Address	8050 SW 10TH STREET SUITE 2000
City-State-Zip:	PLANTATION FL 33324

Title	DIRECTOR
Name	OYAGI, TAKASHI
Address	8050 SW 10TH STREET SUITE 2000
City-State-Zip:	PLANTATION FL 33324

Title	CHIEF INFORMATION SECURITY OFFICER
Name	WILKINS, BRIAN
Address	8050 SW 10TH STREET SUITE 2000
City-State-Zip:	PLANTATION FL 33324

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOHN BARTLEMAN**PRESIDENT****04/09/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date