

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000001463

Entity Name: JANNEY MONTGOMERY SCOTT LLC**Current Principal Place of Business:**1717 ARCH STREET, 19TH FLOOR
PHILADELPHIA, PA 19103**Current Mailing Address:**1717 ARCH STREET, 19TH FLOOR
PHILADELPHIA, PA 19103 US**FEI Number:** 23-0731260**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Authorized Person(s) Detail :

Title	MGR
Name	MCDONNELL, EILEEN C
Address	600 DRESHER ROAD
City-State-Zip:	HORSHAM PA 19044
Title	MGR
Name	LOMBARD, JEROME FJR
Address	1801 MARKET STREET
City-State-Zip:	PHILADELPHIA PA 19103
Title	MGR
Name	CROONQUIST, G. THOMAS JR
Address	505 MAIN ST - 3RD FLOOR
City-State-Zip:	HACKENSACK NJ 07602
Title	MGR
Name	SHAFFER, SHEILA S
Address	1255 23RD STREET N.W. SUITE 150
City-State-Zip:	WASHINGTON DC 20037

Title	MGR
Name	SCHEVE, TIMOTHY C
Address	1801 MARKET STREET
City-State-Zip:	PHILADELPHIA PA 19103
Title	MGR
Name	JOHN, MAINE D
Address	1801 MARKET STREET
City-State-Zip:	PHILADELPHIA PA 19103
Title	MGR
Name	ESKIN, MARK R
Address	1801 MARKET ST
City-State-Zip:	PHILADELPHIA PA 19103
Title	MGR
Name	O'MALLEY, DAVID M
Address	600 DRESHER ROAD
City-State-Zip:	HORSHAM PA 19044

Continues on page 2

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEROME F. LOMBARD, JR.**MANAGER****02/07/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MGR
Name NOBLE, CHARLES J
Address 195 CHURCH STREET, 17TH FLOOR
City-State-Zip: NEW HAVEN CT 06510

Title MGR
Name MULVIHILL, MEGAN E
Address 1717 ARCH STREET, 22ND FLOOR
City-State-Zip: PHILADELPHIA PA 19103