



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2014

1. ID No. 000795862

2. Exact Name of the Limited Liability Company Cetera Advisors LLC

3. State of Formation

State: DE

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

SECURITIES BROKER/DEALER AND INSURANCE AGENCY

5. Principal Office Address

No. and Street: 4600 SOUTH SYRACUSE STREET, SUITE 600

City or Town: DENVER

State: CO Zip: 80237 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: DANA THOMSEN Contact Title:

No. and Street: 401 FIRST STREET, SUITE 300

City or Town: ST CLOUD

State: MN Zip: 56301 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	BRETT HARRISON	4600 S SYRACUSE ST STE 600 DENVER, CO 80237 USA
MANAGER	R LAWRENCE ROTH	200 N SEPULVEDA BLVD EL SEGUNDO, CA 90245 USA
MANAGER	STEVEN J DUNLAP JR	200 N SEPULVEDA BLVD EL SEGUNDO, CA 90245 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 30 Day of September, 2014 at 5:05:37 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By GREG A. OLSON
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2014 State of Rhode Island and Providence Plantations
All Rights Reserved