

OFFICE OF THE ATTORNEY GENERAL  
MARYLAND DIVISION OF SECURITIES  
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Baltimore, Maryland 21202-2020  
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**FILLABLE FORM ISR: APPLICATION FOR RENEWAL OF ISSUER AGENT REGISTRATION  
(ELECTRONIC SIGNATURES ACCEPTABLE)**

Submit via NASAA's EFD selecting UFT or First-Class Mail

RENEWAL FILING FEE: \$50.00

If not submitting via EFD, please make check payable to: "Office of the Attorney General"

Name of Agent: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

MD Issuer Agent Registration No.: \_\_\_\_\_

Home Address: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell Home

Issuer Name \_\_\_\_\_ and MD File No.: \_\_\_\_\_

Issuer's Contact Name: \_\_\_\_\_

Issuer's Address: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

Issuer's Telephone Number: \_\_\_\_\_ Issuer's Email Address: \_\_\_\_\_

On behalf of the Agent and pursuant to §11-406(b) of the Maryland Securities Act, the undersigned, being a duly authorized officer or general partner or sole proprietor of the Issuer, represents that to the best knowledge, information and belief of the Issuer, there has been no change in the information contained in the Agent's application for registration currently in effect, except as explained in the attached supplement.

By: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

**THIS FORM MUST BE RECEIVED ON OR BEFORE DECEMBER 31 , 2024**