

# FORM ADV

## UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION AND REPORT BY EXEMPT REPORTING ADVISERS

Primary Business Name: **ADVANCED ADVISOR GROUP, LLC**  
Other-Than-Annual Amendment - Item 1 Identifying Information  
10/14/2021 4:45:10 PM

CRD Number: **140393**  
Rev. 03/2020

**WARNING:** Complete this form truthfully. False statements or omissions may result in denial of your application, revocation of your registration, or criminal prosecution. You must keep this form updated by filing periodic amendments. See Form ADV General Instruction 4.

### Item 1 Identifying Information

Responses to this Item tell us who you are, where you are doing business, and how we can contact you. If you are filing an *umbrella registration*, the information in Item 1 should be provided for the *filing adviser* only. General Instruction 5 provides information to assist you with filing an *umbrella registration*.

- A. Your full legal name (if you are a sole proprietor, your last, first, and middle names):  
**ADVANCED ADVISOR GROUP, LLC**
- B. (1) Name under which you primarily conduct your advisory business, if different from Item 1.A.  
**ADVANCED ADVISOR GROUP, LLC**  
*List on Section 1.B. of Schedule D any additional names under which you conduct your advisory business.*
- (2) If you are using this Form ADV to register more than one investment adviser under an *umbrella registration*, check this box   
*If you check this box, complete a Schedule R for each relying adviser.*
- C. If this filing is reporting a change in your legal name (Item 1.A.) or primary business name (Item 1.B.(1)), enter the new name and specify whether the name change is of  
 your legal name or  your primary business name:
- D. (1) If you are registered with the SEC as an investment adviser, your SEC file number: **801-118465**  
(2) If you report to the SEC as an *exempt reporting adviser*, your SEC file number:  
(3) If you have one or more Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers:  
No Information Filed
- E. (1) If you have a number ("CRD Number") assigned by the *FINRA's CRD* system or by the *IARD* system, your *CRD* number: **140393**  
*If your firm does not have a CRD number, skip this Item 1.E. Do not provide the CRD number of one of your officers, employees, or affiliates.*
- (2) If you have additional *CRD* Numbers, your additional *CRD* numbers:  
No Information Filed
- F. *Principal Office and Place of Business*
- (1) Address (do not use a P.O. Box):
- |   |                      |                           |                             |
|---|----------------------|---------------------------|-----------------------------|
| Number and Street 1:<br>1995 EAST RUM RIVER DRIVE S | Number and Street 2: |                           |                             |
| City:<br>CAMBRIDGE                                  | State:<br>Minnesota  | Country:<br>United States | ZIP+4/Postal Code:<br>55008 |
- If this address is a private residence, check this box:
- List on Section 1.F. of Schedule D any office, other than your principal office and place of business, at which you conduct investment advisory business. If you are applying for registration, or are registered, with one or more state securities authorities, you must list all of your offices in the state or states to which you are applying for registration or with whom you are registered. If you are applying for SEC registration, if you are registered only with the SEC, or if you are reporting to the SEC as an exempt reporting adviser, list the largest twenty-five offices in terms of numbers of employees as of the end of your most recently completed fiscal year.*
- (2) Days of week that you normally conduct business at your *principal office and place of business*:  
 Monday - Friday  Other:  
Normal business hours at this location:  
8AM-4:30PM
- (3) Telephone number at this location:  
763-689-9023
- (4) Facsimile number at this location, if any:  
763-689-3742
- (5) What is the total number of offices, other than your *principal office and place of business*, at which you conduct investment advisory business as of the end of your most recently completed fiscal year?

G. Mailing address, if different from your *principal office and place of business* address:

Number and Street 1:		Number and Street 2:	
City:	State:	Country:	ZIP+4/Postal Code:

If this address is a private residence, check this box:

H. If you are a sole proprietor, state your full residence address, if different from your *principal office and place of business* address in Item 1.F.:

Number and Street 1:		Number and Street 2:	
City:	State:	Country:	ZIP+4/Postal Code:

**Yes No**

I. Do you have one or more websites or accounts on publicly available social media platforms (including, but not limited to, Twitter, Facebook and LinkedIn)?  

*If "yes," list all firm website addresses and the address for each of the firm's accounts on publicly available social media platforms on Section 1.I. of Schedule D. If a website address serves as a portal through which to access other information you have published on the web, you may list the portal without listing addresses for all of the other information. You may need to list more than one portal address. Do not provide the addresses of websites or accounts on publicly available social media platforms where you do not control the content. Do not provide the individual electronic mail (e-mail) addresses of employees or the addresses of employee accounts on publicly available social media platforms.*

## J. Chief Compliance Officer

(1) Provide the name and contact information of your Chief Compliance Officer. If you are an *exempt reporting adviser*, you must provide the contact information for your Chief Compliance Officer, if you have one. If not, you must complete Item 1.K. below.

Name:		Other titles, if any:	
KENT SCHUTTE		PRESIDENT	
Telephone number:		Facsimile number, if any:	
763/689-9023		763/689-3742	
Number and Street 1:		Number and Street 2:	
1995 EAST RUM RIVER DRIVE S.			
City:	State:	Country:	ZIP+4/Postal Code:
CAMBRIDGE	Minnesota	United States	55008

Electronic mail (e-mail) address, if Chief Compliance Officer has one:  
KENTS@TSAINVEST.COM

(2) If your Chief Compliance Officer is compensated or employed by any *person* other than you, a *related person* or an investment company registered under the Investment Company Act of 1940 that you advise for providing chief compliance officer services to you, provide the *person's* name and IRS Employer Identification Number (if any):

Name:

IRS Employer Identification Number:

## K. Additional Regulatory Contact Person: If a person other than the Chief Compliance Officer is authorized to receive information and respond to questions about this Form ADV, you may provide that information here.

Name:		Titles:	
MATTHEW ROTHCHILD		COMPLIANCE OFFICER	
Telephone number:		Facsimile number, if any:	
763 552 6075		763-689-3742	
Number and Street 1:		Number and Street 2:	
1995 EAST RUM RIVER DRIVE S.			
City:	State:	Country:	ZIP+4/Postal Code:
CAMBRIDGE	Minnesota	United States	55008

Electronic mail (e-mail) address, if contact person has one:  
MATTR@EFSADVISORS.COM

**Yes No**

L. Do you maintain some or all of the books and records you are required to keep under Section 204 of the Advisers Act, or similar state law, somewhere other than your *principal office and place of business*?  

*If "yes," complete Section 1.L. of Schedule D.*

**Yes No**

M. Are you registered with a *foreign financial regulatory authority*?

Answer "no" if you are not registered with a foreign financial regulatory authority, even if you have an affiliate that is registered with a foreign financial regulatory authority. If "yes," complete Section 1.M. of Schedule D.

- N. Are you a public reporting company under Sections 12 or 15(d) of the Securities Exchange Act of 1934? Yes No
- O. Did you have \$1 billion or more in assets on the last day of your most recent fiscal year? Yes No  
   
If yes, what is the approximate amount of your assets:
- \$1 billion to less than \$10 billion
  - \$10 billion to less than \$50 billion
  - \$50 billion or more

For purposes of Item 1.O. only, "assets" refers to your total assets, rather than the assets you manage on behalf of clients. Determine your total assets using the total assets shown on the balance sheet for your most recent fiscal year end.

P. Provide your *Legal Entity Identifier* if you have one:

A *legal entity identifier* is a unique number that companies use to identify each other in the financial marketplace. You may not have a *legal entity identifier*.

### SECTION 1.B. Other Business Names

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: EFS ADVISORS

Jurisdictions

<input type="checkbox"/> AL	<input type="checkbox"/> IL	<input type="checkbox"/> NE	<input type="checkbox"/> SC
<input type="checkbox"/> AK	<input type="checkbox"/> IN	<input type="checkbox"/> NV	<input type="checkbox"/> SD
<input type="checkbox"/> AZ	<input type="checkbox"/> IA	<input type="checkbox"/> NH	<input type="checkbox"/> TN
<input type="checkbox"/> AR	<input type="checkbox"/> KS	<input type="checkbox"/> NJ	<input type="checkbox"/> TX
<input type="checkbox"/> CA	<input type="checkbox"/> KY	<input type="checkbox"/> NM	<input type="checkbox"/> UT
<input type="checkbox"/> CO	<input type="checkbox"/> LA	<input type="checkbox"/> NY	<input type="checkbox"/> VT
<input type="checkbox"/> CT	<input type="checkbox"/> ME	<input type="checkbox"/> NC	<input type="checkbox"/> VI
<input type="checkbox"/> DE	<input type="checkbox"/> MD	<input type="checkbox"/> ND	<input type="checkbox"/> VA
<input type="checkbox"/> DC	<input type="checkbox"/> MA	<input type="checkbox"/> OH	<input type="checkbox"/> WA
<input type="checkbox"/> FL	<input type="checkbox"/> MI	<input type="checkbox"/> OK	<input type="checkbox"/> WV
<input type="checkbox"/> GA	<input checked="" type="checkbox"/> MN	<input type="checkbox"/> OR	<input type="checkbox"/> WI
<input type="checkbox"/> GU	<input type="checkbox"/> MS	<input type="checkbox"/> PA	<input type="checkbox"/> WY
<input type="checkbox"/> HI	<input type="checkbox"/> MO	<input type="checkbox"/> PR	<input type="checkbox"/> Other:
<input type="checkbox"/> ID	<input type="checkbox"/> MT	<input type="checkbox"/> RI	

### SECTION 1.F. Other Offices

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1: 12301 WHITEWATER DRIVE  
City: MINNETONKA State: Minnesota Country: United States ZIP+4/Postal Code: 55343

Number and Street 2: #145

If this address is a private residence, check this box:

Telephone Number: 6129651979 Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:  
660229

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- (1) Broker-dealer (registered or unregistered)
- (2) Bank (including a separately identifiable department or division of a bank)
- (3) Insurance broker or agent
- (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- (5) Registered municipal advisor
- (6) Accountant or accounting firm
- (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1: 1711 E 13TH STREET	Number and Street 2: 		
City: HIBBING	State: Minnesota	Country: United States	ZIP+4/Postal Code: 55746

If this address is a private residence, check this box:

Telephone Number: 218-262-1680	Facsimile Number, if any: 218-262-2388
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If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:  
427834

How many *employees* perform investment advisory functions from this office location?  
2

Are other business activities conducted at this office location? (check all that apply)

- (1) Broker-dealer (registered or unregistered)
- (2) Bank (including a separately identifiable department or division of a bank)
- (3) Insurance broker or agent
- (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- (5) Registered municipal advisor
- (6) Accountant or accounting firm
- (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1: 677 ANNE STREET NW	Number and Street 2: SUITE E		
City: BEMIDJI	State: Minnesota	Country: United States	ZIP+4/Postal Code: 56601

If this address is a private residence, check this box:

Telephone Number:  
218-751-5957

Facsimile Number, if any:  
218-759-2152

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:  
544998

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- (1) Broker-dealer (registered or unregistered)
- (2) Bank (including a separately identifiable department or division of a bank)
- (3) Insurance broker or agent
- (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- (5) Registered municipal advisor
- (6) Accountant or accounting firm
- (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:  
5757 SANIBEL DRIVE

Number and Street 2:

City:  
MINNETONKA

State:  
Minnesota

Country:  
United States

ZIP+4/Postal Code:  
55343

If this address is a private residence, check this box:

Telephone Number:  
800-229-2848

Facsimile Number, if any:  
952-832-0031

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:  
316414

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- (1) Broker-dealer (registered or unregistered)
- (2) Bank (including a separately identifiable department or division of a bank)
- (3) Insurance broker or agent
- (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- (5) Registered municipal advisor
- (6) Accountant or accounting firm
- (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:  
1950 NORTHWESTERN AVE

City:  
STILLWATER

State:  
Minnesota

Number and Street 2:  
#106

Country:  
United States

ZIP+4/Postal Code:  
55082

If this address is a private residence, check this box:

Telephone Number:  
651 439 3131

Facsimile Number, if any:  
651 439 8282

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:  
562901

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- (1) Broker-dealer (registered or unregistered)
- (2) Bank (including a separately identifiable department or division of a bank)
- (3) Insurance broker or agent
- (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- (5) Registered municipal advisor
- (6) Accountant or accounting firm
- (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:  
11210 LAKE POINTE DRIVE

City:  
CHISAGO CITY

State:  
Minnesota

Number and Street 2:

Country:  
United States

ZIP+4/Postal Code:  
55013

If this address is a private residence, check this box:

Telephone Number:  
651 257 7494

Facsimile Number, if any:  
651257 7494

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- (1) Broker-dealer (registered or unregistered)
- (2) Bank (including a separately identifiable department or division of a bank)
- (3) Insurance broker or agent
- (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- (5) Registered municipal advisor
- (6) Accountant or accounting firm
- (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1: 110 2ND ST S		Number and Street 2: #308	
City: WAITE PARK	State: Minnesota	Country: United States	ZIP+4/Postal Code: 56387

If this address is a private residence, check this box:

Telephone Number: 320 558 2955	Facsimile Number, if any: 320 558 2955
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If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?  
2

Are other business activities conducted at this office location? (check all that apply)

- (1) Broker-dealer (registered or unregistered)
- (2) Bank (including a separately identifiable department or division of a bank)
- (3) Insurance broker or agent
- (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- (5) Registered municipal advisor
- (6) Accountant or accounting firm
- (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1: 41 SHERBURNE AVE		Number and Street 2:	
City: ST. PAUL	State: Minnesota	Country: United States	ZIP+4/Postal Code: 55103

If this address is a private residence, check this box:

Telephone Number: 651-767-1281	Facsimile Number, if any: 651-292-4895
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If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:  
325532

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- (1) Broker-dealer (registered or unregistered)
- (2) Bank (including a separately identifiable department or division of a bank)
- (3) Insurance broker or agent
- (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- (5) Registered municipal advisor
- (6) Accountant or accounting firm
- (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

11599 ROBINSON DRIVE NW

Number and Street 2:

City:

COON RAPIDS

State:

Minnesota

Country:

United States

ZIP+4/Postal Code:

55433

If this address is a private residence, check this box:

Telephone Number:

763 789 4010

Facsimile Number, if any:

763 706 3955

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:  
316449

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

(1) Broker-dealer (registered or unregistered)

(2) Bank (including a separately identifiable department or division of a bank)

(3) Insurance broker or agent

(4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

(5) Registered municipal advisor

(6) Accountant or accounting firm

(7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

### SECTION 1.I. Website Addresses

List your website addresses, including addresses for accounts on publicly available social media platforms where you control the content (including, but not limited to, Twitter, Facebook and/or LinkedIn). You must complete a separate Schedule D Section 1.I. for each website or account on a publicly available social media platform.

Address of Website/Account on Publicly Available Social Media Platform: [HTTPS://WWW.FACEBOOK.COM/EDUCATORSFINANCIAL/](https://www.facebook.com/educatorsfinancial/)

Address of Website/Account on Publicly Available Social Media Platform: [HTTP://WWW.ADVANCEDADVISOR.NET](http://www.advancedadvisor.net)

Address of Website/Account on Publicly Available Social Media Platform: [HTTPS://WWW.LINKEDIN.COM/COMPANY/EDUCATORS-FINANCIAL-SERVICES-INC-/](https://www.linkedin.com/company/educators-financial-services-inc-/)

### SECTION 1.L. Location of Books and Records

Complete the following information for each location at which you keep your books and records, other than your *principal office and place of business*. You must complete a separate Schedule D, Section 1.L. for each location.

Name of entity where books and records are kept:

GLOBAL RELAY

Number and Street 1:

233 S. WACKER DRIVE

Number and Street 2:



City: CHICAGO State: Illinois Country: United States ZIP+4/Postal Code: 60606

If this address is a private residence, check this box:

Telephone Number: (866) 484-6630 Facsimile number, if any:

This is (check one):

- one of your branch offices or affiliates.
- a third-party unaffiliated recordkeeper.
- other.

Briefly describe the books and records kept at this location.

GLOBAL RELAY IS AN ONLINE EMAIL CORRESPONDANCE AND SOCIAL MEDIA ARCHIVING AND REVIEW TOOL. EMAIL CORRESPONDANCE AND SOCIAL MEDIA PAGE ARCHIVES ARE KEPT THERE.

Name of entity where books and records are kept:  
SITEQUEST TECHNOLOGIES

Number and Street 1: 707 WEST 700 SOUTH #100 Number and Street 2:  
City: WOODS CROSS State: Utah Country: United States ZIP+4/Postal Code: 84087

If this address is a private residence, check this box:

Telephone Number: (801) 896-0951 Facsimile number, if any:

This is (check one):

- one of your branch offices or affiliates.
- a third-party unaffiliated recordkeeper.
- other.

Briefly describe the books and records kept at this location.

SITEQUEST TECHNOLOGIES IS A PROVIDER OF THE EAGLEEYE SURVEILLANCE ONLINE REPRESENTATIVE SURVEILLANCE TOOL. RESULTS YIELDED BY ONLINE SURVEILLANCE SWEEPS ARE KEPT WITH THEM

Name of entity where books and records are kept:  
OVERDORF SYSTEMS CONSULTANTS

Number and Street 1: 120 PIERCE AVE Number and Street 2:  
City: HAMBURG State: New York Country: United States ZIP+4/Postal Code: 14075

If this address is a private residence, check this box:

Telephone Number: 716 406 8511 Facsimile number, if any:

This is (check one):

- one of your branch offices or affiliates.
- a third-party unaffiliated recordkeeper.
- other.

Briefly describe the books and records kept at this location.

CLIENT RELATIONSHIP MANAGEMENT (SYCAMORE) SYSTEM PROVIDER.

Name of entity where books and records are kept:  
CIRRUS DATA LLC

Number and Street 1:  
944 LEROSE COURT NE

Number and Street 2:

City:  
MARIETTA

State:  
Georgia

Country:  
United States

ZIP+4/Postal Code:  
30068-4232

If this address is a private residence, check this box:

Telephone Number:  
770 578 0287

Facsimile number, if any:

This is (check one):

- one of your branch offices or affiliates.  
 a third-party unaffiliated recordkeeper.  
 other.

Briefly describe the books and records kept at this location.  
COMMISSIONS PROCESSING PROVIDER ASSOCIATED WITH CRM PROVIDER.

Name of entity where books and records are kept:  
MARKETING PRO

Number and Street 1:  
2226 N. COAST HIGHWAY #320

Number and Street 2:

City:  
NEWPORT

State:  
Oregon

Country:  
United States

ZIP+4/Postal Code:  
97365

If this address is a private residence, check this box:

Telephone Number:  
(866) 254-6035

Facsimile number, if any:

This is (check one):

- one of your branch offices or affiliates.  
 a third-party unaffiliated recordkeeper.  
 other.

Briefly describe the books and records kept at this location.  
MARKETING PRO PROVIDES AN ONLINE ARCHIVE, REVIEW, AND APPROVAL TOOL FOR ADVERTISING AND OTHER PUBLIC-FACING MATERIALS. THOSE MATERIALS ARE KEPT THERE.

Name of entity where books and records are kept:  
PREMIER TECHNOLOGIES

Number and Street 1:  
320 S. ANKERY BLVD.

Number and Street 2:

City:  
ANKERY

State:  
Iowa

Country:  
United States

ZIP+4/Postal Code:  
50023

If this address is a private residence, check this box:

Telephone Number:  
(800) 371-3015

Facsimile number, if any:

This is (check one):

- one of your branch offices or affiliates.
- a third-party unaffiliated recordkeeper.
- other.

Briefly describe the books and records kept at this location.

PREMIER TECHNOLOGIES OPERATES OFFSITE COMPUTER SERVERS THAT STORE ALL ELECTRONIC BOOKS AND RECORDS OF THE FIRM.

Name of entity where books and records are kept:  
THE HOME OF KENT SCHUTTE, PRESIDENT OF AAG

Number and Street 1:  
33604 LAVERNE ROAD N.E.

Number and Street 2:

City:  
CAMBRIDGE

State:  
Minnesota

Country:  
United States

ZIP+4/Postal Code:  
55008

If this address is a private residence, check this box:

Telephone Number:  
612-387-8200

Facsimile number, if any:

This is (check one):

- one of your branch offices or affiliates.
- a third-party unaffiliated recordkeeper.
- other.

Briefly describe the books and records kept at this location.

BOOKS AND RECORDS RELATED TO AAG'S ADVISORY BUSINESS THAT ARE OLDER THAN THREE YEARS.

#### **SECTION 1.M. Registration with Foreign Financial Regulatory Authorities**

No Information Filed