


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 26, 2004 08:00 AM
Secretary of State

DOCUMENT # M01000002587 1. Entity Name QUESTECH FINANCIAL LLC	
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Principal Place of Business 98 MILL PLAIN ROAD DANBURY, CT 06811	Mailing Address 98 MILL PLAIN ROAD DANBURY, CT 06811
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DO NOT WRITE IN THIS SPACE



01162004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 06-1521607	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

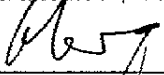
Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MOSKOWITZ, STANLEY A 98 MILL PLAIN ROAD DANBURY, CT 06811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BERG, STANLEY A 98 MILL PLAIN ROAD DANBURY, CT 06811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SIRANKO, KENNETH J 98 MILL PLAIN ROAD DANBURY, CT 06811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000013290
 01/26/04-80047-020 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:  Stanley Berg
 EVP/CFO
 Date: 01/20/04 Daytime Phone #: 203-778-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE