## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000124932

City-St-Zip:

FAIRFIELD, CT 06825

Entity Name: COMAC MANAGEMENT, LLC

FILED Apr 09, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1900 CONSULATE PLACE #1503 WEST PALM BEACH, FL 33401 US **New Mailing Address: Current Mailing Address:** 1900 CONSULATE PLACE #1503 WEST PALM BEACH, FL 33401 US FEI Number: 26-1565044 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: G B & B-B REGISTRIES, LLC 7301 SW 57TH COURT SUITE 560 SOUTH MIAMI, FL 33143 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete COHEN, THEODORE P Name: Name: 1900 CONSULATE PLACE #1503 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33401 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition COHEN, BENITA M Name: Name: Address: 1900 CONSULATE PLACE #1503 Address: City-St-Zip: WEST PALM BEACH, FL 33401 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition COHEN, SHARI J Name: Name: 22 LAWRIDGE DRIVE Address: Address: City-St-Zip: RYE BROOK, NY 10573 US City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: COHEN, DEBRA R Name: Address: 16 ELM WAY STREET Address: City-St-Zip: PROVIDENCE, RI 02906 US City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition COHENURAM, WENDY L Name: Name: 12 PARK DRIVE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

City-St-Zip:

SIGNATURE: THEODORE P COHEN MM 04/09/2009