## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#815868** 

Entity Name: L.K. COMSTOCK & COMPANY, INC.

FILED Apr 02, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
5 PENN PL 12TH FLOO NEW YORK		US			
Current Mailing Address: Ne			New Mailir	ng Address:	
5 PENN PL 12TH FLOO NEW YORK		US			
FEI Number:	13-0594190	FEI Number Applied For ( )	El Number Not Appli	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES ST STE 105 TALLAHASSEE, FL 32301 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					
Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () D LEVY, JEFFREY 5 PENN PLAZA 1: NEW YORK, NY	2TH FL	Title: Name: Address: City-St-Zip:	P&D (X) Change ( ) Addition LEVY, JEFFREY M 5 PENN PLAZA 12TH FL NEW YORK, NY 10001	
Title: Name: Address: City-St-Zip:	P () C LEVY, JEFFREY 5 PENNA PLAZA NEW YORK, NY	12TH FL	Title: Name: Address: City-St-Zip:	EVP (X) Change ( ) Addition HOLT, MICHAEL 5 PENNA PLAZA 12TH FL NEW YORK, NY 10001	
Title: Name: Address: City-St-Zip:	VP () C ROTHSCHILD, MI 5 PENN PLAZA 1: NEW YORK, NY	2TH FL	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ST&V () C CELLINI, GENE 5 PENN PLAZA 1: NEW YORK, NY		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	AS () D BYRNE, EDWARI 1100 FRANKLIN A GARDEN CITY, N	AVE.	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition PATTERSON, MARK 5 PENN PLAZA NEW YORK, NY 10001	
Title: Name: Address: City-St-Zip:	AS () D ROUNDTREE, TE 5 PENN PLAZA 1: NEW YORK, NY	2TH FL	Title: Name: Address: City-St-Zip:	() Change () Addition	

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GENE CELLINI ST&V 04/02/2009