

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081977

Entity Name: COBALT GROWTH, LLC

FILED
Jun 25, 2009
Secretary of State

Current Principal Place of Business:

5 LITTLE DRIVE
BALLSTON SPA, NY 12020

New Principal Place of Business:

20 CHURCH AVE
BALLSTON SPA, NY 12020

Current Mailing Address:

5 LITTLE DRIVE
BALLSTON SPA, NY 12020

New Mailing Address:

20 CHURCH AVE
BALLSTON SPA, NY 12020

FEI Number: 20-1776349 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHAFER, MICHAEL W
6630 SEAWIND DRIVE
FT. MYERS, FL 33908 US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: CANTY, WILLIAM J
Address: 5 LITTLE DRIVE
City-St-Zip: BALLSTON SPA, NY 12020

Title: MGRM () Delete
Name: PABIS, JAMES M
Address: 444 BROADWAY
City-St-Zip: SARATOGA SPRINGS, NY 12866

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CANTY, WILLIAM J
Address: 20 CHURCH AVE
City-St-Zip: BALLSTON SPA, NY 12020

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: WILLIAM CANTY

MGRM

06/25/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date