

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000007193

Entity Name: COMSTAR NETWORK, LLC

FILED
Apr 19, 2009
Secretary of State

Current Principal Place of Business:

1120 JENSEN BEACH BOULEVARD
SUITE 564
JENSEN BEACH, FL 34957 US

Current Mailing Address:

1120 JENSEN BEACH BOULEVARD
SUITE 564
JENSEN BEACH, FL 34957 US

New Principal Place of Business:

1820 NE JENSEN BEACH BOULEVARD
SUITE 564
JENSEN BEACH, FL 34957 US

New Mailing Address:

1820 NE JENSEN BEACH BOULEVARD
SUITE 564
JENSEN BEACH, FL 34957 US

FEI Number: 20-4229154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'HEARN, JAMES J
2466 NE 17TH COURT
JENSEN BEACH, FL 34957 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: MGR () Delete
Name: PAWLOW, ZENIE
Address: 1120 JENSEN BEACH BOULEVARD SUITE 564
City-St-Zip: JENSEN BEACH, FL 34957 US

Title: MGR () Delete
Name: O'HEARN, JAMES J
Address: 2466 NE 17TH CT
City-St-Zip: JENSEN BEACH, FL 34957 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PAWLOW, ZENIE
Address: 1820 NE JENSEN BEACH BLVD SUITE 564
City-St-Zip: JENSEN BEACH, FL 34957 US

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: JAMES J O'HEARN

MGR

04/19/2009

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