


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

DOCUMENT # M01000000502
 1. Entity Name
 PSCOMM, LLC



Principal Place of Business ONE CHURCH STREET, SUITE 900 ROCKVILLE, MD 20850	Mailing Address ONE CHURCH STREET, SUITE 900 ROCKVILLE, MD 20850
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DO NOT WRITE IN THIS SPACE



06302004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 52-2052548	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

STEWART, ROBERT
 9775 WYNTREE LANE
 TALLAHASSEE, FL 32311

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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 September 8, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COHEN, JOHN ONE CHURCH STREET, SUITE 900 ROCKVILLE, MD 20850
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 07/26/04-80014-005 55.00

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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:  _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #