

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002292

FILED
Apr 05, 2004
Secretary of State

Entity Name: COMCEPT SOLUTIONS, LLC

Current Principal Place of Business:

1126 CENTRAL AVE STE. 200
ST PETERSBURG, FL 33705

New Principal Place of Business:

Current Mailing Address:

1126 CENTRAL AVE STE. 200
ST PETERSBURG, FL 33705

New Mailing Address:

FEI Number: 52-1847879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTFELD, HOWARD E
1126 CENTRAL AVE STE. 200
ST PETERSBURG, FL 33705

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/MEMBERS:

Title: MGRM () Delete
Name: MARTFELO, HOWARD E
Address: 1126 CENTRAL AVE., STE 200
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: MGRM () Delete
Name: ATWELL, GLENN D
Address: 1126 CENTRAL AVE., STE 200
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: MGRM () Delete
Name: MATTOS, JOE
Address: 4501 BEECH RD
City-St-Zip: CAMP SPRINGS, MD 20748

Title: MGR () Delete
Name: STANFORD, STEVEN C
Address: 1126 CENTRAL AVE., STE 200
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: MGR () Delete
Name: STANFORD, STEVEN C
Address: 1126 CENTRAL AVE., STE 200
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: MGR () Delete
Name: WHIPPLE, JEFFREY
Address: 4501 BEECH RD
City-St-Zip: CAMP SPRINGS, FL 20748

ADDITIONS/CHANGES:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HOWARD MARTFELD

MGRM

04/05/2004

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