2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002292

City-St-Zip:

CAMP SPRINGS, FL 20748

Entity Name: COMCEPT SOLUTIONS, LLC

FILED Jul 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 13770 58TH STREET NORTH CLEARWATER, FL 33760 **New Mailing Address: Current Mailing Address:** 13770 58TH STREET NORTH CLEARWATER, FL 33760 FEI Number: 52-1847879 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) 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: Name and Address of New Registered Agent: MARTFELD, HOWARD E 13770 58TH STREET NORTH CLEARWATER, FL 33760 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Delete (X) Change () Addition MARTFELO, HOWARD E MARTFELD, HOWARD E Name: Name: 13770 58TH STREET NORTH SUITE 311 Address: 13770 58TH STREET NORTH SUITE 311 Address: City-St-Zip: CLEARWATER, FL 33760 City-St-Zip: CLEARWATER, FL 33760 Title: MGRM () Delete Title: () Change () Addition ATWELL, GLENN D Name: Name: Address: 13770 58TH STREET NORTH SUITE 311 Address: City-St-Zip: CLEARWATER, FL 33760 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MATTOS, JOE Name: Name: 4501 BEECH RD Address: Address: City-St-Zip: CAMP SPRINGS, MD 20748 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MATTOS, JOHN A Name: Address: 4501 BEECH ROAD Address: City-St-Zip: CAMP SPRINGS, MD 20748 City-St-Zip: Title: MGR () Delete Title: () Change () Addition WHIPPLE, JEFFREY Name: Name: 4501 BEECH RD Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: HOWARD E MARTFELD MGRM 07/06/2006