

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000003072

Entity Name: GOM, LLC

FILED
Feb 17, 2009
Secretary of State

Current Principal Place of Business:

150 BROADWAY, SUITE 510
NEW YORK, NY 10038

New Principal Place of Business:

271 MADISON AVENUE SUITE 1100
NEW YORK, NY 10016

Current Mailing Address:

150 BROADWAY, SUITE 510
NEW YORK, NY 10038

New Mailing Address:

271 MADISON AVENUE SUITE 1100
NEW YORK, NY 10016

FEI Number: 22-3762036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATCH, JOHN D ESQ.
1267 BERKSHIRE LANE, SUITE 200
TARPON, FL 34688 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: FISCHOFER, JOHN M
Address: 200 OCEAN AVENUE
City-St-Zip: MASSAPEQUA PARK, NY 11762

Title: MGRM () Delete
Name: LARSON, CHRISTOPHER
Address: 350 EDWARD ST
City-St-Zip: FAIRFIELD, CT 06824

ADDITIONS/CHANGES:

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 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: CHRISTOPHER LARSON

MRG

02/17/2009

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