

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006618

**FILED**  
**Jan 12, 2010**  
**Secretary of State**

**Entity Name:** COMPUSOLVE GOVERNMENT SOLUTIONS LLC

**Current Principal Place of Business:**

90-D RAYNOR AVE  
RONKONKOMA, NY 11779

**New Principal Place of Business:**

**Current Mailing Address:**

90-D RAYNOR AVE  
RONKONKOMA, NY 11779

**New Mailing Address:**

FEI Number: 05-0623165

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PUELLO, RAMON  
11183 PRAIRIE HAWK DR  
ORLANDO, FL 32837 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  
Name: BLOWES, DARYL  
Address: 90-D RAYNOR AVE  
City-St-Zip: RONKONKOMA, NY 11779

Title: MGRM  
Name: EDEN, DOUGLAS  
Address: 90-D RAYNOR AVE  
City-St-Zip: RONKONKOMA, NY 11779

I hereby 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: DARYL BLOWES

CEO

01/12/2010

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