

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M97000000884

FILED
Jun 25, 2009
Secretary of State

Entity Name: COMPREHENSIVE PLANNING-GOODMAN, LLC

Current Principal Place of Business:

6900 JERICO TPKE-SUITE 208
SYOSSET, NY 11791

New Principal Place of Business:

Current Mailing Address:

6900 JERICO TPKE-SUITE 208
SYOSSET, NY 11791

New Mailing Address:

FEI Number: 11-3240958 **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:

ROUGH, HERBERT L
16353 FERN DRIVE
FORT LAUDERDALE, FL 33326 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: MDL PLANNING, INC.
Address: 44 SADDLE LANE
City-St-Zip: ROSLYN, NY 11577

Title: MGRM () Delete
Name: ROUGH AGENCY OF FLORIDA, INC.
Address: 16353 FERN DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33326

Title: MGRM () Delete
Name: PHILLIP GOODMAN AGENCY, INC.
Address: JERICO TPKE
City-St-Zip: SYOSSET, NY 11791

Title: MGRM () Delete
Name: ISLAND BROKERAGE CORP
Address: 35 SUTTON PLACE
City-St-Zip: NEW YORK, NY 10022

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:

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: MARK D. LEVY

MGRM

06/25/2009

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