

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 26, 2006 8:00 am**  
**Secretary of State**

01-26-2006 90070 041 \*\*\*\*50.00

**DOCUMENT # M99000001721**

1. Entity Name  
SUBURBAN ENERGY SERVICES GROUP LLC



Principal Place of Business

240 RT 10 WEST  
WHIPPANY, NJ 07981

Mailing Address

P.O. BOX 206  
WHIPPANY, NJ 07981

**20003010**



01162006 No Chg-LLC

CR2E08

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**22-3642078**

5. Certificate of Status Desired ☐

**\$5.00** Act  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
ALEXANDER, MARK  
240 RTE. 10 WEST  
WHIPPANY, NJ 07981

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
SOKOL, JANICE  
240 RTE. 10 WEST  
WHIPPANY, NJ 07981

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/16/06

Date

(973) 503-9102

Daytime Phone #