

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2008 8:00 am
Secretary of State

03-24-2008 90068 044 ***158.75

DOCUMENT # P26632

1. Entity Name
COMTECH ANTENNA SYSTEMS, INC.



Principal Place of Business
3100 COMMUNICATIONS ROAD
ST. CLOUD, FL 34769

Mailing Address
3100 COMMUNICATIONS ROAD
ST. CLOUD, FL 34769

50001081



02292008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2968936	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHRISTY, THOMAS
3100 COMMUNICATIONS ROAD
SAINT CLOUD, FL 34769

**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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	SD
NAME	BURT, RICHARD L
STREET ADDRESS	3100 COMMUNICATIONS RD.
CITY-ST-ZIP	ST. CLOUD, FL
TITLE	PD
NAME	CHRISTY, THOMAS
STREET ADDRESS	3100 COMMUNICATIONS RD.
CITY-ST-ZIP	ST. CLOUD, FL
TITLE	CD
NAME	KORNBERG, FRED
STREET ADDRESS	68 SOUTH SERVICE RD, SUITE 230
CITY-ST-ZIP	MELVILLE, NY 11747
TITLE	D
NAME	ROUSE, ROBERT G
STREET ADDRESS	68 SOUTH SERVICE RD, SUITE 230
CITY-ST-ZIP	MELVILLE, NY 11747
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Thomas C Christy Thomas C Christy 2/29/08 467-892-6111