

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214550798

1.) CORPORATION NAME:

L.K. Comstock National Transit, Inc.

DUE DATE: **11/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1808635**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8200 ROBERTS DR. SUITE 425

CITY/ST/ZIP: ATLANTA, GA 30350

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	MARK PATTERSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	8200 ROBERTS DRIVE SUITE 425		
CITY/ST/ZIP/CO:	ATLANTA, GA 30350		
NAME:	GENE CELLINI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/S/T		
ADDRESS:	5 PENN PLAZA 15TH FLOOR		
CITY/ST/ZIP/CO:	NEW YORK, NY 10001		
NAME:	MICHAEL ROTHSCHILD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP-ENGINEERING		
ADDRESS:	5 PENN PLAZA		
CITY/ST/ZIP/CO:	NEW YORK, NY 10001		
NAME:	TERESE ROUNDTREE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SEC		
ADDRESS:	5 PENN PLAZA		
CITY/ST/ZIP/CO:	NEW YORK, NY 10001		
NAME:	BEN LEVY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	5 PENN PLAZA		
CITY/ST/ZIP/CO:	NEW YORK, NY 10001		
NAME:	KEVIN RYAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	AUTH, OFFICER-		
ADDRESS:	5 PENN PLAZA		
CITY/ST/ZIP/CO:	NEW YORK, NY 10001		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY M LEVY DIRECTOR 5 PENN PLAZA NEW YORK, NY 10001	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ GENE CELLINI	GENE CELLINI, VP/S/T	11/22/2014	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			