## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F99000005105

Entity Name: COMMERCE CAPITAL MARKETS, INC.

FILED Mar 06, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
2005 MARK	MERCE SQUAF ET STREET, S PHIA, PA 1910:	SUITE 200			
Current Mailing Address:			New Maili	New Mailing Address:	
ONE COMMERCE SQUARE 2005 MARKET STREET, SUITE 200 PHILADELPHIA, PA 19103					
FEI Number: 2	23-2177819	FEI Number Applied For ( ) FEI	Number Not Appl	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US					
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: DANIELLE ELLENBERGER, ASST. V.P					
Electronic Signature of Registered Agent Date					
Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GREGOR, STAN	Delete TREET, SUITE 200 PA 19103	Title: Name: Address: City-St-Zip:	PCD (X) Change ( ) Addition SPINELLI, RAYMOND T 2005 MARKET STREET, SUITE 200 PHILADELPHIA, PA 19103	
Title: Name: Address: City-St-Zip:	D () E MALLOY, TERRA 1701 ROUTE 70 CHERRY HILL, N	EAST	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () E WOJCIK, DAVID 1701 ROUTE 70 CHERRY HILL, N		Title: Name: Address: City-St-Zip:	TD (X) Change ( ) Addition RUBINSOHN, MARC 2005 MARKET STREET, SUITE 200 PHILADELPHIA, PA 19103	
Title: Name: Address: City-St-Zip:	SIEBEN, MARC	/ENUE, 3RD FLOOR	Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition REILLY, JAMES E 1703 ROUTE 70 EAST CHERRY HILL, NJ 8034	
Title: Name: Address: City-St-Zip:	LOUKAS, RONAL	TREET, SUITE 200	Title: Name: Address: City-St-Zip:	AS (X) Change ( ) Addition RYAN, GEOFFREY W TWO PORTLAND SQUARE PORTLAND, ME 04101	
Title: Name: Address: City-St-Zip:	RUBINSOHN, MA	TREET, SUITE 200	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEOFFREY W. RYAN, ASSISTANT SECRETARY AS 03/06/2009