

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000098120

**FILED**  
**Apr 28, 2008**  
**Secretary of State**

**Entity Name:** ALLIANCE COMMERCIAL MANAGEMENT, LLC

**Current Principal Place of Business:**

2027 PRINCETON STREET  
SARASOTA, FL 34237

**New Principal Place of Business:**

**Current Mailing Address:**

2027 PRINCETON STREET  
SARASOTA, FL 34237

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FORD, JAMES M  
2027 PRINCETON STREET  
SARASOTA, FL 34237    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:                      MGR                      ( ) Delete  
Name:                      FORD, JAMES M  
Address:                      2027 PRINCETON STREET  
City-St-Zip:                      SARASOTA, FL 34237

Title:                      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      MGRM                      ( ) Change (X) Addition  
Name:                      WINGATE, AMY V  
Address:                      2027 PRINCETON STREET  
City-St-Zip:                      SARASOTA, FL 34237 US

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: JAMES M FORD                      MGR                      04/28/2008

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