

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025450

FILED
Feb 05, 2004
Secretary of State

Entity Name: MERCANTILE COMMERCIAL CAPITAL, LLC

Current Principal Place of Business:

2200 LUCIEN WAY
STE 333
MAITLAND, FL 32751

New Principal Place of Business:

940 CENTRE CIRCLE
SUITE 2000
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

2200 LUCIEN WAY
STE 333
MAITLAND, FL 32751

New Mailing Address:

940 CENTRE CIRCLE
SUITE 2000
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 02-0657291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HURN, CHRISTOPHER
1672 KERSLEY CIRCLE
HEATHROW, FL 32746 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/MEMBERS:

Title: MGRM () Delete
Name: HURN, CHRISTOPHER
Address: 1672 KERSLEY CIRCLE
City-St-Zip: HEATHROW, FL 32746 US

Title: MGRM () Delete
Name: LONGSTAFF, GEOFFREY
Address: 634 MOURNING DOVE CIRCLE
City-St-Zip: LAKE MARY, FL 32746 US

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRISTOPHER HURN

MGRM

02/05/2004

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