

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026035

FILED
Mar 09, 2007
Secretary of State

Entity Name: CLOSING PROCESS COORDINATOR LLC

Current Principal Place of Business:

3409 DEL PRADO BLVD
SUITE103
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

3409 DEL PRADO BLVD
SUITE 103
CAPE CORAL, FL 33904

New Mailing Address:

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

Name and Address of Current Registered Agent:

MAHAN, CONNIE L
3409 DEL PRADO BLVD
SUITE 103
CAPE CORAL, FL, FL 33904 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: MAHAN, ROBERT L
Address: 2816 DEL PRADO BLVD. STE. 2
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MAHAN, ROBERT L
Address: 3409 DEL PRADO BLVD. STE. 103
City-St-Zip: CAPE CORAL, FL 33904

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT MAHAN

MGR

03/09/2007

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