2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000054929

Entity Name: CAPITAL EXCHANGE ASSIST LLC

FILED Apr 17, 2009 Secretary of State

() Change () Addition

Current Principal Place of Business: New Principal Place of Business:

2418 S. BAY AVE 901 E. 25T

SANFORD, FL 32771 US SANFORD, FL 32771 US

Current Mailing Address: New Mailing Address:

2418 S. BAY AVE

SANFORD, FL 32771 US

FEI Number: 01-0837568 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TAYLOR, SCOTT 2418 SOUTH BAY SANFORD, FL 32771 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:

Electronic Signature of Registered Agent Date

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MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

 Title:
 T
 () Delete
 Title:

 Name:
 TAYLOR, SCOTT C
 Name:

 Address:
 2418 S. BAY AVE
 Address:

 City-St-Zip:
 SANFORD, FL 32771 US
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 TAYLOR, JULIE A
 Name:

 Address:
 2418 S. BAY AVE
 Address:

 City-St-Zip:
 SANFORD, FL 32771 US
 City-St-Zip:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 TAYLOR, VANCE A
 Name:
 TAYLOR, VANCE A

 Address:
 2418
 S. BAY AVE
 Address:
 2419
 S. BAY AVE

 City-St-Zip:
 SANFORD, FL 32771 US
 City-St-Zip:
 SANFORD, FL 32771 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: SCOTT C TAYLOR T 04/17/2009