

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000103869

FILED
Mar 31, 2009
Secretary of State

Entity Name: COMMERCIAL CAPITAL ASSURANCE, LLC

Current Principal Place of Business:

4422 N. CHURCH AVE.
SUITE J
TAMPA, FL 33614

New Principal Place of Business:

13941 CLUBHOUSE DRIVE
SUITE 110
TAMPA, FL 33618

Current Mailing Address:

P.O. BOX 26563
TAMPA, FL 33623

New Mailing Address:

FEI Number: 20-3683538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SADORF, RICK W ESQ.
1744 N. BELCHER ROAD
SUITE 150
CLEARWATER, FL 33765 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: MGRM () Delete
Name: HAYDEN, FRANK R
Address: P.O. BOX 26563
City-St-Zip: TAMPA, FL 33623

ADDITIONS/CHANGES:

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

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: FRANK R. HAYDEN

MGRM

03/31/2009

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