

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 23, 2009  
Secretary of State**

DOCUMENT# L06000001828

Entity Name: NCM COMMERCE CENTER, LLC

**Current Principal Place of Business:**

5770 SHIRLEY STREET  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

5770 SHIRLEY STREET  
NAPLES, FL 34109

**New Mailing Address:**

FEI Number: 20-4067128      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

WOOD, DOUGLAS A  
1000 NORTH TAMIAMI TRAIL  
SUITE 201  
NAPLES, FL 34102 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: DEL DUCA, MICHAEL  
Address: 5770 SHIRLEY STREET  
City-St-Zip: NAPLES, FL 34109

**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: MICHAEL DEL DUCA

MGR

04/23/2009

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