2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# L08000044237

Entity Name: COMMERCIAL CAPITAL PARTNERS LLC

Current Principal Place of Business:

981 HWY 98 E
SUITE 3 #187
DESTIN, FL 32541

New Principal Place of Business:

3855 PARK AVE
MIAMI, FL 33133

Current Mailing Address:

981 HWY 98 E
SUITE 3 #187
DESTIN, FL 32541

New Mailing Address:

PO BOX 141 652
CORAL GABLES, FL 33114

FEI Number: 26-2490952 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOURGEOIS, DEBBIE L
981 HWY 98 E
SUITE 3 #187
DESTIN, FL, FL 32541 US

Name and Address of New Registered Agent:

CALHOUN, GUY R
3855 PARK AVE
MIAMI, FL 33133 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: GUY R CALHOUN 04/20/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BOURGEOIS, DEBBIE L
Address: 981 HWY 98 E, SUITE 3, #187
City-St-Zip: DESTIN, FL 32541

Title: MGR ( ) Delete
Name: CALHOUN, GUY R
Address: 981 HWY 98 E
City-St-Zip: SUITE 3, #187, FL 32541

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: CALHOUN, GUY R
Address: 3855 PARK AVE
City-St-Zip: MIAMI, FL 33133

Title: MGRM (X) Change ( ) Addition
Name: CALHOUN, GUY R
Address: 3855 PARK AVE
City-St-Zip: MIAMI, FL 33133

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: GUY R CALHOUN MGRM 04/20/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date