

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000111353

**FILED**  
**Mar 18, 2009**  
**Secretary of State**

**Entity Name:** CTM CAPITAL MANAGEMENT, LLC

**Current Principal Place of Business:**

8720 BAY COLONY DR.  
MANSION LA PALMA # 302  
NAPLES, FL 34108 US

**New Principal Place of Business:**

**Current Mailing Address:**

8720 BAY COLONY DR.  
MANSION LA PALMA # 302  
NAPLES, FL 34108 US

**New Mailing Address:**

**FEI Number:** 26-3762552      **FEI Number Applied For** ( )      **FEI Number Not Applicable** ( )      **Certificate of Status Desired** ( )

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

MCCORMICK, CHRISTOPHER T  
8720 BAY COLONY DR  
MANSION LA PALMA # 302  
NAPLES, FL 34108 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:** CEO ( ) Delete  
**Name:** MCCORMICK, CHRISTOPHER T  
**Address:** 8720 BAY COLONY DR., MANSION LA PALMA #302  
**City-St-Zip:** NAPLES, FL 34108 US

**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: CHRISTOPHER T. MCCORMICK      CEO      03/18/2009

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