

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000003115

FILED  
Feb 11, 2009  
Secretary of State

Entity Name: BOCA COMMERCIAL PARTNERS, L.C.

**Current Principal Place of Business:**

430 WEST 4TH STREET  
BOCA GRANDE, FL 33921

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 686  
BOCA GRANDE, FL 33921

**New Mailing Address:**

FEI Number: 65-0933110

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAYES, GEORGE L III  
C/O POWELL, CARNEY, HAYES & SILVERSTEIN PA  
ONE PROGRESS PLAZA, SUITE #1210  
ST. PETERSBURG, FL 33701 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: SPURGEON, MARK A  
Address: POST OFFICE BOX 132  
City-St-Zip: BOCA GRANDE, FL 33921

Title: MGRM ( ) Delete  
Name: BOYD, LYNN S  
Address: 6493 TAEDA DRIVE  
City-St-Zip: SARASOTA, FL 34241

Title: MGRM (X) Delete  
Name: DIAZ, LESLIE K SR.  
Address: P.O. BOX 925  
City-St-Zip: BOCA GRANDE, FL 33921

Title: MGRM (X) Delete  
Name: SUNDBURG, ALFRED R JR.  
Address: POST OFFICE BOX 1081  
City-St-Zip: BOCA RATON, FL 33921

Title: MGRM (X) Delete  
Name: BARR, CHARLES P  
Address: 251 BIENTERRA TRAIL # 12  
City-St-Zip: ROCKFORD, IL 61107

**ADDITIONS/CHANGES:**

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

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

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

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

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: MARK SPURGEON

MGRM

02/11/2009

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