

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001732

FILED  
May 01, 2007  
Secretary of State

Entity Name: CLOSING USA LLC

**Current Principal Place of Business:**

250 MILE CROSSING BLVD., STE. 4  
ROCHESTER, NY 14624

**New Principal Place of Business:**

**Current Mailing Address:**

250 MILE CROSSING BLVD., STE. 4  
ROCHESTER, NY 14624

**New Mailing Address:**

FEI Number: 42-1541630      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FOO, ELLIOT CEO  
Address: 250 MILE CROSSING BLVD., STE. 4  
City-St-Zip: ROCHESTER, NY 14624

Title: MGRM ( ) Delete  
Name: VENTO, THOMAS A COO  
Address: 250 MILE CROSSING BLVD., STE. 4  
City-St-Zip: ROCHESTER, NY 14624

Title: MGRM ( ) Delete  
Name: COTRONEO, ANTHONY MBR  
Address: 250 MILE CROSSING BLVD., STE. 4  
City-St-Zip: ROCHESTER, NY 14624

**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:

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: THOMAS A. VENTO

COO

05/01/2007

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