

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000006272

Entity Name: SCP 2007-C27-507 LLC

FILED
Mar 03, 2009
Secretary of State

Current Principal Place of Business:

220 JACKSON STREET
SUITE 2000
SAN FRANCISCO, CA 94111

New Principal Place of Business:

Current Mailing Address:

220 JACKSON STREET
SUITE 2000
SAN FRANCISCO, CA 94111

New Mailing Address:

FEI Number: 20-3939348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: SWANSON, CHARLES S
Address: 220 JACKSON STREET, STE. 2000
City-St-Zip: SAN FRANCISCO, CA 94111

Title: MGR () Delete
Name: WOLF, DOUGLAS H
Address: 220 JACKSON STREET, STE. 2000
City-St-Zip: SAN FRANCISCO, CA 94111

Title: MGR () Delete
Name: LEWITT, MICHAEL E
Address: 621 NW 53RD STREET, STE. 620
City-St-Zip: BOCA RATON, FL 33487

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: DOUGLAS WOLF

MGR

03/03/2009

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