

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000145971

FILED
Jan 30, 2007
Secretary of State

Entity Name: COMMERCIAL LENDING CAPITAL CORP.

Current Principal Place of Business:

1770 SAN MARCO RD
MARCO ISLAND, FL 34145

New Principal Place of Business:

Current Mailing Address:

1770 SAN MARCO RD
MARCO ISLAND, FL 34145

New Mailing Address:

FEI Number: 75-3172095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREUSEL, JAMIE B
1104 N COLLIER BLVD
MARCO ISLAND, FL 34145 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CCEO () Delete
Name: COFER, JOHN V
Address: 242 GRAPEWOOD CT
City-St-Zip: MARCO ISLAND, FL 34145

Title: D () Delete
Name: MCLAUGHLIN, STEPHEN A
Address: 278 MAIN ST
City-St-Zip: OLD TOWN, ME 04468

Title: D () Delete
Name: HANSON, MELANIE A
Address: 911 WHISKEY CREEK DR
City-St-Zip: MARCO ISLAND, FL 34145

Title: D () Delete
Name: FEDOR, BRUCE
Address: 28171 WINTHROP CIR
City-St-Zip: BONITA SPRINGS, FL 341343317

Title: S () Delete
Name: GREUSEL, JAMIE B
Address: 1104 N COLLIER BLVD
City-St-Zip: MARCO ISLAND, FL 34145

Title: D () Delete
Name: MCGOWAN, JOHN
Address: 929 COLLIER CT B-403
City-St-Zip: MARCO ISLAND, FL 34145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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
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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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS M WHELAN

SVP

01/30/2007

Electronic Signature of Signing Officer or Director

Date