



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2008

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00

In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

1. ID No. 000175299		2. Exact name of the limited liability company Commerce Commercial Leasing, LLC		
3. State of Formation New Jersey		4. Brief description of the character of the business which is actually conducted in Rhode Island To lease all types of, and make loans secured by, tangible and intangible real or personal property.		
5. Principal office address 1701 Route 70 East		City Cherry Hill	State New Jersey	Zip 08034
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:				
Contact Name Corporation Service Company		Contact Title Registered Agent		
Street Address 222 Jefferson Boulevard, Suite 200		City Warwick	State Rhode Island	Zip 02888
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
Manager Name Joseph Manion		Manager Name Douglas J. Pauls		
Street Address 1701 Route 70 East		Street Address 1701 Route 70 East		
City Cherry Hill	State New Jersey	Zip 08034	City Cherry Hill	State New Jersey
Manager Name Anthony R. Sasso		Manager Name		
Street Address 1701 Route 70 East		Street Address		
City Cherry Hill	State New Jersey	Zip 08034	City	State
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11				
Agent Name Corporation Service Company		Address 222 Jefferson Boulevard, Suite 200		
Address		City Warwick	Zip 02888	

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

000175299

File Date	8-29-08
Check No.	313106
By:	<i>MNC</i>
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.

Charles Fiumefreddo 8/27/08
Signature of Authorized Person Date
Charles Fiumefreddo
Print or Type Name of Authorized Person