


2006 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Aug 03, 2006 08:00 AM
Secretary of State
Paey

DOCUMENT # 840396
 1. Entity Name
 LLOYDS TSB BANK PLC



Principal Place of Business
 25 GRESHAM STREET
 LONDON EC2V 7HN,

Mailing Address
 2 S. BISCAYNE BLVD.
 SUITE 3200
 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE



07072006 No Chg-P CR2E034 (11/05)

4. FEI Number
 13-3321516 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ESTIMA, CARLOS
 ONE BISCAYNE TOWER
 SUITE 3200
 MIAMI, FL 33131

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

U00000573272
 08/03/06 03003 014 150.00

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	VAN DEN BERGH, MAARTEN
STREET ADDRESS	25 GRESHAM STREET
CITY-ST-ZIP	LONDON, ec2v 7hn
TITLE	D
NAME	PRITCHARD, DAVID
STREET ADDRESS	25 GRESHAM STREET
CITY-ST-ZIP	LONDON, ec2v 7 hn
TITLE	DO
NAME	DANIELS, ERIC
STREET ADDRESS	25 GRESHAM STREET
CITY-ST-ZIP	LONDON, ec2v 7hn
TITLE	DO
NAME	WEIR, HELEN
STREET ADDRESS	25 GRESHAM STREET
CITY-ST-ZIP	LONDON EC2V 7HN,
TITLE	D
NAME	ESTIMA, CARLOS
STREET ADDRESS	ONE BISCAYNE TOWER, SUITE 3200
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	O
NAME	MCKENDRY, KEVIN P ESQ.
STREET ADDRESS	1251 AVE OF THE AMERICAS (39TH FLOOR)
CITY-ST-ZIP	NEW YORK, NY 10020

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **8/1/06**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #