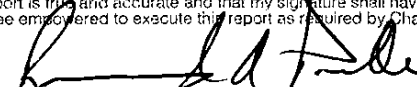


FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR 31 AM 9:24

DOCUMENT # A96000001650 1. Entity Name LPI WETLAND MITIGATION BANK, LTD.			
Principal Place of Business 13451 MCGREGOR BLVD., STE. 31 FORT MYERS, FL 33919		Mailing Address 13451 MCGREGOR BLVD., STE. 31 FORT MYERS, FL 33919	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent PAVELKA, RAYMOND A 13451 MCGREGOR BLVD., STE. 31 FORT MYERS, FL 33919		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable.			
9. Capital Contributions as Shown on record. \$1,000,010.00		10. Amount of Capital Contributions in FLORIDA to date.	
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.			
12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP	P93000084962 MARINER PROPERTIES DEVELOPMENT, INC. 13451 MCGREGOR BLVD., STE. 31 FORT MYERS, FL 33919	STREET ADDRESS CITY- ST- ZIP	
DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP		STREET ADDRESS CITY- ST- ZIP	100050091951 04/07/05--01005--003 **535.00
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes			
SIGNATURE: 		Date: 3/28/05 239-481-2011 (103)	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date	