2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DO NOT WRITE IN THIS SPACE

DOCUMENT #A96000001650

1. Entity Name

LPI WETLAND MITIGATION BANK, LTD.



FILED Apr 20, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

13451 MCGREGOR BLVD., STE. 31 FORT MYERS, FL 33919

13451 MCGREGOR BLVD., STE. 31 FORT MYERS, FL 33919



02202007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0718457 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

PAVELKA, RAYMOND A 13451 MCGREGOR BLVD., STE. 31 FORT MYERS, FL 33919

DO NOT WRITE IN THIS SPACE

| 8. | The above named entity submits this statement for the purpose of changing its registered office of | or registered agent, or both, in the State of Florida. I am familiar with, and accept |
|-----|--|---|
| | the obligations of registered agent. | V00000719858 |
| SIC | SNATURE | 05/01/07-80081-017 508.75 |
| SIC | Signature, typed or printed name of registered agent and title if applicable. | DATE |
| | | |

FILE NOWIII FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00

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.

| NOTE: General Partners MAY NOT be changed on the | | |
|---|---|--|
| 12. | 2. GENERAL PARTNER INFORMATION | |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | P93000084962 MARINER PROPERTIES DEVELOPMENT, INC. 13451 MCGREGOR BLVD., STE. 31 FORT MYERS, FL 33919 | |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | | |
| DOCUMENT # NAME STREET ADDRESS CITY-SI-ZIP | | |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | | |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | | |
| DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP | | |

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14. 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 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 food of the property of the limited partnership or the receiver or trustee empowered to execute this food of the property of the limited partnership or the receiver or trustee empowered to execute this food of the property of the limited partnership or the receiver or trustee empowered to execute this food of the limited partnership or the receiver or trustee empowered to execute this food of the limited partnership or the receiver or trustee empowered to execute this food of the limited partnership or the receiver or trustee empowered to execute this food of the limited partnership or the receiver or trustee.

SIGNATURE: 8

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/16/07

739-481-201

Daytime Phone #