

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005666

Entity Name: EVEST LENDING, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

100 LARRABEE ROAD SUITE 210
WESTBROOK, ME 04092

New Principal Place of Business:

Current Mailing Address:

100 LARRABEE ROAD SUITE 210
WESTBROOK, ME 04092

New Mailing Address:

FEI Number: 20-3108551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLAHERTY, TODD
10101 A WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065 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: C () Delete
Name: PRESTON, ANDREW
Address: 100 LARRABEE ROAD SUITE 210
City-St-Zip: WESTBROOK, ME 04092

Title: P () Delete
Name: ROBBINS, CHRISTOPHER
Address: 100 LARRABEE ROAD SUITE 210
City-St-Zip: WESTBROOK, ME 04092

Title: S (X) Delete
Name: FAIRFIELD, AMY
Address: 100 LARRABEE ROAD SUITE 210
City-St-Zip: WESTBROOK, ME 04092

Title: T () Delete
Name: MURDOCH, DONALD
Address: 100 LARRABEE ROAD SUITE 210
City-St-Zip: WESTBROOK, ME 04092

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
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: CHRISTOPHER ROBBINS

P/S

04/28/2006

Electronic Signature of Signing Officer or Director

Date