## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000007043

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

MARIETTA, GA 30067

CHEEK, BARBARA

MARIETTA, GA 30067

( ) Delete

2470 WINDY HILL ROAD, SUITE 351

DS

Entity Name: WEBTREELOAN.COM, INC.

FILED Apr 27, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1100 CIRCLE 75 PARKWAY **SUITE 1100** ATLANTA, GA 30339 **New Mailing Address: Current Mailing Address:** 1100 CIRCLE 75 PARKWAY **SUITE 1100** ATLANTA, GA 30339 FEI Number: 20-3756374 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition BONADONA, CHAD BONADONA, CHAD Name: Name: 2470 WINDY HILL ROAD, SUITE 351 1100 CIRCLE 75 PARKWAY, STE 1100 Address: Address: City-St-Zip: MARIETTA, GA 30067 City-St-Zip: ATLANTA, GA 30339 DV Title: DV Title: () Delete (X) Change ( ) Addition JONES, TRACY Name: JONES, TRACY Name: 2470 WINDY HILL ROAD, SUITE 351 1100 CIRCLE 75 PARKWAY, STE 1100 Address: Address: MARIETTA, GA 30067 City-St-Zip: City-St-Zip: ATLANTA, GA 30339 Title: Title: DV ( ) Delete DV (X) Change ( ) Addition POLK, KEITH POLK, KEITH Name: Name: 2470 WINDY HILL ROAD, SUITE 351 1100 CIRCLE 75 PARKWAY, STE 1100 Address: Address:

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

ATLANTA, GA 30339

CHEEK, BARBARA

ATLANTA, GA 30339

(X) Change ( ) Addition

1100 CIRCLE 75 PARKWAY, STE 1100

DS

SIGNATURE: CHAD BONADONA CEO 04/27/2006