

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000259

FILED  
May 21, 2007  
Secretary of State

Entity Name: MERRILL LYNCH MORTGAGE LENDING, INC.

**Current Principal Place of Business:**

FOUR WORLD FINANCIAL CENTER  
NEW YORK, NY 10080

**New Principal Place of Business:**

**Current Mailing Address:**

FOUR WORLD FINANCIAL CENTER  
NEW YORK, NY 10080

**New Mailing Address:**

FEI Number: 51-0006522

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DCHR ( ) Delete  
Name: MALMATRON, EDWARD C  
Address: 6 HARWOOD DR.  
City-St-Zip: MADISON, NJ 07940

Title: PD ( ) Delete  
Name: MARION, JOSEPH R  
Address: 79 BUDKHORN CT.  
City-St-Zip: PARAMUS, NJ 07652

Title: SVD ( ) Delete  
Name: MCGOVERN, MICHAEL M  
Address: 306 GARFIELD PL  
City-St-Zip: BROOKLYN, NY 11215

Title: VD ( ) Delete  
Name: WILLECK, JAMES F  
Address: 17812 BEARPATH TR.  
City-St-Zip: EDEN PRAIRIE, MN

**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 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: MICHAEL MCGOVERN

SVD

05/21/2007

Electronic Signature of Signing Officer or Director

Date