

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025215

Entity Name: WATERMARK LENDING LLC

FILED
Apr 02, 2006
Secretary of State

Current Principal Place of Business:

12811 KENWOOD LANE
#103
FORT MYERS, FL 33907

New Principal Place of Business:

11928 FAIRWAY LAKES DRIVE
FORT MYERS, FL 33913

Current Mailing Address:

12811 KENWOOD LANE
#103
FORT MYERS, FL 33907

New Mailing Address:

11928 FAIRWAY LAKES DRIVE
FORT MYERS, FL 33913

FEI Number: 61-1426316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDENFIELD, DAVID
18125 HILDA DRIVE
FORT MYERS, FL 33912 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EDENFIELD, DAVID P
Address: 18125 HILDA DRIVE
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM () Delete
Name: ALEKOV, TIFFANY J
Address: 13327 HIGHLAND CHASE PLACE
City-St-Zip: FORT MYERS, FL 33913

Title: MGRM () Delete
Name: ALEKOV, KRISTIAN V
Address: 13327 HIGHLAND CHASE PLACE
City-St-Zip: FORT MYERS, FL 33913

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID EDENFIELD

MGRM

04/02/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date