2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098980

Entity Name: LIBERTY MORTGAGE XVI, LLC

2121 PONCE DE LEON BLVD.., PH

CORAL GABLES, FL 33134

Address: City-St-Zip: FILED May 15, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 568 YAMATO ROAD 2ND FLOOR BOCA RATON, FL 33431 **Current Mailing Address: New Mailing Address:** 568 YAMATO ROAD 2ND FLOOR BOCA RATON, FL 33431 FEI Number: 20-4392437 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GERSON, GARY N 1645 PALM BEACH LAKES BLVD., SUITE 1200 WEST PALM BEACH, FL 33401 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete PHILLIPS, RICHARD A Name: Name: 568 YAMATO ROAD, 2ND FLOOR Address: Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition PHILLIPS, DAWN M Name: Name: Address: 568 YAMATO ROAD, 2ND FLOOR Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: Title: MGR () Delete Title: () Change () Addition WOLFE, LENNY J Name: Name: 2121 PONCE DE LEON BLVD.., PH Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: MADES, MARA S Name: 2121 PONCE DE LEON BLVD..., PH Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: MGR () Delete Title: () Change () Addition MEYERS, STUART I Name: Name:

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 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.

Address:

City-St-Zip:

SIGNATURE: DAWN M PHILLIPS MGRM 05/15/2007