

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120400

FILED
Jan 06, 2006
Secretary of State

Entity Name: BLACKACRE LENDING CORP.

Current Principal Place of Business:

1801 NORTH PINE ISLAND ROAD
102
PLANTATION, FL 33322

New Principal Place of Business:

1290 WESTON ROAD
300
WESTON, FL 33326

Current Mailing Address:

1801 NORTH PINE ISLAND ROAD
102
PLANTATION, FL 33322

New Mailing Address:

1290 WESTON ROAD
300
WESTON, FL 33326

FEI Number: 56-2476332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOCKWOOD, ANDREW W
1801 NORTH PINE ISLAND ROAD
102
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

LOCKWOOD, ANDREW W
1290 WESTON ROAD
300
WESTON, FL 33326 US

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: _____

01/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOCKWOOD, ANDREW W
Address: 1801 NORTH PINE ISLAND ROAD
City-St-Zip: PLANTATION, FL 33322

Title: VP () Delete
Name: LOCKWOOD, PEARL J
Address: 1801 NORTH PINE ISLAND ROAD
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOCKWOOD, ANDREW W
Address: 1290 WESTON ROAD, STE. 300
City-St-Zip: WESTON, FL 33326

Title: VP (X) Change () Addition
Name: LOCKWOOD, PEARL J
Address: 1290 WESTON ROAD, STE. 300
City-St-Zip: WESTON, FL 33326

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: PEARL LOCKWOOD

VP

01/06/2006

Electronic Signature of Signing Officer or Director

Date