

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000167433

FILED
Apr 29, 2006
Secretary of State

Entity Name: COMMONWEALTH LENDING CORPORATION

Current Principal Place of Business:

1950 LEE RD STE 110
WINTER PK, FL 32789

New Principal Place of Business:

940 CENTRE CIRCLE
3002
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

1950 LEE RD STE 110
WINTER PK, FL 32789

New Mailing Address:

940 CENTRE CIRCLE
3002
ALTAMONTE SPRINGS, FL 32714

FEI Number: 83-0414354

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, PETER
1950 LEE RD STE 110
WINTER PK, FL 32789 US

Name and Address of New Registered Agent:

GRAHAM, PETER
940 CENTRE CIRCLE
3002
ALTAMONTE SPRINGS, FL 32714 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:

04/29/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTVS () Delete
Name: GRAHAM, PETER L
Address: 1950 LEE RD STE 114
City-St-Zip: WINTER PK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTVS (X) Change () Addition
Name: GRAHAM, PETER L
Address: 940 CENTRE CIRCLE, SUITE 3002
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: PETER GRAHAM

PRES

04/29/2006

Electronic Signature of Signing Officer or Director

Date