

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004498

FILED
May 01, 2006
Secretary of State

Entity Name: LENDERLIVE NETWORK, INC.

Current Principal Place of Business:

4500 CHERRY CREEK DR SO
#200
GLENDALE, CO 80246

New Principal Place of Business:

Current Mailing Address:

4500 CHERRY CREEK DR SO
#200
GLENDALE, CO 80246

New Mailing Address:

FEI Number: 62-1796508 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: SD () Delete
Name: WHITE, GARRETT O
Address: 4500 CHERRY CREEK DR. S, #200
City-St-Zip: GLENDALE, CO 80246

Title: PD () Delete
Name: RICK, SEEHAUSEN
Address: 4500 CHERRY CREEK DR. S, #200
City-St-Zip: GLENDALE, CO 80246

Title: D () Delete
Name: MEHTA, SHRIKANT C
Address: 354 INDUSCO CT
City-St-Zip: TROY, MI 43083

Title: D () Delete
Name: PARSONS, ROGER
Address: 354 INDUSCO
City-St-Zip: TROY, MI 48083

Title: D () Delete
Name: MEHTA, BELA
Address: 354 INDUSCO CT
City-St-Zip: TROY, MI 43083

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:

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 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: R. SEEHAUSEN

_____ Electronic Signature of Signing Officer or Director

PRES

05/01/2006

_____ Date