

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006970

FILED  
Apr 12, 2007  
Secretary of State

Entity Name: NEW JERSEY AUTONOMY INC.

## Current Principal Place of Business:

ONE MARKET, SPEAR TOWER, 19TH FLOOR  
SAN FRANCISCO, CA 94105

## New Principal Place of Business:

## Current Mailing Address:

ONE MARKET, SPEAR TOWER, 19TH FLOOR  
SAN FRANCISCO, CA 94105

## New Mailing Address:

FEI Number: 77-0434497

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LYNCH, MICHAEL P  
Address: CAMBRIDGE BUSINESS PARK COWLEY ROAD  
City-St-Zip: CAMBRIDGE, CB4 OWZ, UK, XX 00000

Title: CEO ( ) Delete  
Name: EGAN, CHRISTOPHER CEO  
Address: 25 WOODLAN AVENUE  
City-St-Zip: SAN FRANCISCO, CA 94117

Title: COO ( ) Delete  
Name: KANTER, ANDREW COO  
Address: CAMBRIDGE BUSINESS PARK COWLEY ROAD  
City-St-Zip: CAMBRIDGE, CB4 OWZ, UK, XX 00000

Title: CFO ( ) Delete  
Name: HUSSAIN, SUSHOVAN CFO  
Address: CAMBRIDGE BUSINESS PARK COWLEY ROAD  
City-St-Zip: CAMBRIDGE, CB4 OWZ, UK, XX 00000

## 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:

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: SUSHOVAN HUSSAIN

CFO

04/12/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date