

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000003638

**Entity Name:** NEWTEK SMALL BUSINESS FINANCE, INC.

**FILED**  
**Apr 25, 2013**  
**Secretary of State**  
**CC6577340338**

**Current Principal Place of Business:**

60 HEMPSTEAD AVE  
6TH FLOOR  
WEST HEMPSTEAD, NY 11552

**Current Mailing Address:**

60 HEMPSTEAD AVE  
6TH FLOOR  
WEST HEMPSTEAD, NY 11552 US

**FEI Number: 03-0464287**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            DOWNS, PETER  
Address        60 HEMPSTEAD AVE  
                  6TH FLOOR  
City-State-Zip: WEST HEMPSTEAD NY 11552

Title            VP  
Name            BRUNET , CRAIG J.  
Address        60 HEMPSTEAD AVENUE  
                  6TH FLOOR  
City-State-Zip: WEST HEMPSTEAD NY 11552

Title            S  
Name            SLOANE, BARRY  
Address        60 HEMPSTEAD AVE  
                  6TH FLOOR  
City-State-Zip: WEST HEMPSTEAD NY 11552

Title            DC  
Name            COX, JOHN  
Address        60 HEMPSTEAD AVE  
                  6T FLOOR  
City-State-Zip: WEST HEMPSTEAD NY 11552

*I hereby 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 all other like empowered.*

**SIGNATURE: BARRY SLOANE**

**SECRETARY**

**04/25/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date