## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 834227**

Entity Name: NEW AMERICA NETWORK INC.

FILED Sep 01, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
1200 SOUT	ORATION SYS TH PINE ISLA DN, FL 33324	ND ROAD				
Current Mailing Address:			New Mailing Address:			
1200 SOUT	ORATION SY TH PINE ISLA ON, FL 33324	ND ROAD				
FEI Number:	23-1916759	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
1200 S PIN	ORATION SY: E ISLAND RO DN, FL 33324	DAD				
The above in the State		submits this statement for the pu	rpose of changing i	ts registered offi	ce or registered agent, or both	٦,
SIGNATUR	RE:					
	Electror	ic Signature of Registered Agen	t		Date	_
Election Carr	paign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CCEO ( ) FINN, GERALD 141 CORSON / TRENTON, NJ	AVE	Title: Name: Address: City-St-Zip:	()C	hange ( ) Addition	
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:	()0	hange ( ) Addition	
Title: Name: Address: City-St-Zip:	TP ( ) FINN, JEFFRE' 15 RED CEDAF TRENTON, NJ	RDRIVE	Title: Name: Address: City-St-Zip:	TP (X) C FINN, JEFFREY N 14 SLEEPY HOLL ALLENTOWN, NJ	OW DRIVE	
Title: Name: Address: City-St-Zip:	` '		Title: Name: Address: City-St-Zip:	()C	hange ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) HANSON, PETE 225 MOORE S' HACKENSACK	TREET	Title: Name: Address: City-St-Zip:	( ) C	hange()Addition	
Title: Name: Address: City-St-Zip:	KRANZOORF, 630 WEST GE	Delete NORMAN M DIRECTO RMANTOWN AVE STE 321 EETING, PA 19462 US	Title: Name: Address: City-St-Zip:	()C	hange()Addition	

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: JEFFREY M. FINN PRES 09/01/2006