

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2007 8:00 am
Secretary of State

03-16-2007 90026 005 ***150.00

DOCUMENT # 837238

1. Entity Name *EntreCap Financial LLC*
PITNEY BOWES CREDIT CORPORATION



Principal Place of Business
27 WATERVIEW DR
SHELTON, CT 06484-4361 US

Mailing Address
27 WATERVIEW DR
SHELTON, CT 06484-4361

2. Principal Place of Business - No P.O. Box #
3 Corporate Drive
Suite, Apt., #, etc.
Suite 300

3. Mailing Address
3 Corporate Drive
Suite, Apt., etc.
Suite 300

City & State
Shelton, CT
Zip
06484-6222 Country
USA

City & State
Shelton, CT
Zip
06484-6222 Country
USA



02262007 Chg-P CR2E034 (12/06)

4. FEI Number
06-0946476

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reissuing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	☒ Delete
NAME	MURRAY, MARTIN	
STREET ADDRESS	40 HULL PLACE	
CITY-ST-ZIP	RIDGEFIELD, CT 06877	
TITLE	PSD	☒ Delete
NAME	WILLIAMSON, KEITH H	
STREET ADDRESS	100 BROOKDALE RD	
CITY-ST-ZIP	STAMFORD, CT	
TITLE	V	☒ Delete
NAME	OSMANSKI, LAWRENCE	
STREET ADDRESS	6 STONE OAK DR	
CITY-ST-ZIP	NEW MILFORD, CT 06776	
TITLE	VP	☒ Delete
NAME	HUGHES, CHRISTIAN	
STREET ADDRESS	465 LOST DISTRICT DR	
CITY-ST-ZIP	NEW CANAAN, CT 06840	
TITLE	AS	☒ Delete
NAME	ALMEDIA, MARIE ELENA	
STREET ADDRESS	27 WATERVIEW DR	
CITY-ST-ZIP	SHELTON, CT 06484	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Director	☒ Change ☐ Addition
NAME	W. Brett Ingersoll	
STREET ADDRESS	349 Park Ave	
CITY-ST-ZIP	New York, NY 10171	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	President	☒ Change ☐ Addition
NAME	Osman, Lawrence	
STREET ADDRESS	3 Corporate Drive	
CITY-ST-ZIP	Shelton, CT 06484-6222	
TITLE	VP	☒ Change ☐ Addition
NAME	Hughes, Christian	
STREET ADDRESS	3 Corporate Drive - Ste 300	
CITY-ST-ZIP	Shelton, CT 06484-6222	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lawrence D. Osmani, President 3/1/07

Date

Daytime Phone #