2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007
Secretary of State

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Entity Name: EQUIPOINT FINANCIAL NETWORK, INC.

Current Principal Place of Business:

334 VIA VERA CRUZ STE. 254
SAN MARCOS, CA 92078

New Principal Place of Business:

Current Mailing Address:

334 VIA VERA CRUZ STE. 254
SAN MARCOS, CA 92078

New Mailing Address:

FEI Number: 33-0442970 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: CP ( ) Delete
Name: ANDERSON, FRAN
Address: 334 VIA VERA CRUZ STE. 254
City-St-Zip: SAN MARCOS, CA 92078

Title: VCVP ( ) Delete
Name: FERGUSON, MICHAEL W
Address: 334 VIA VERA CRUZ STE. 254
City-St-Zip: SAN MARCOS, CA 92078

Title: DS (X) Delete
Name: ANDERSON, ALAN
Address: 334 VIA VERA CRUZ STE. 254
City-St-Zip: SAN MARCOS, CA 92078

Title: VP ( ) Delete
Name: WODARSKI, LAWRENCE J
Address: 2390 LINDBERGH ST
City-St-Zip: AUBURN, CA 95602

Title: VP (X) Delete
Name: KAY, STEVEN
Address: 2390 LINDBERGH ST
City-St-Zip: AUBURN, CA 95602

Title: VP ( ) Delete
Name: OLIVEIRA, RONALD E
Address: 2390 LINDBERGH ST
City-St-Zip: AUBURN, CA 95602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SRVP (X) Change ( ) Addition
Name: ALBA, RICHARD
Address: 5207 SUNRISE BLVD., SUITE 200
City-St-Zip: FAIR OAKS, CA 95628

Title: SEC (X) Change ( ) Addition
Name: COPPES, REBECCA H
Address: 334 VIA VERA CRUZ STE. 254
City-St-Zip: SAN MARCOS, CA 92078

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: REBECCA H. COPPES SEC 01/08/2007

Electronic Signature of Signing Officer or Director — Date