

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003638

FILED  
Jun 30, 2005  
Secretary of State

Entity Name: NEWTEK SMALL BUSINESS FINANCE, INC.

**Current Principal Place of Business:**

462 SEVENTH AVE., 14TH FLOOR  
NEW YORK, NY 10018

**New Principal Place of Business:**

**Current Mailing Address:**

462 SEVENTH AVE., 14TH FLOOR  
NEW YORK, NY 10018

**New Mailing Address:**

FEI Number: 03-0464287      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DOWNS, PETER  
Address: 462 SEVENTH AVE., 14TH FLOOR  
City-St-Zip: NEW YORK, NY 10018

Title: V ( ) Delete  
Name: HANSEN, SUZANNE  
Address: 462 SEVENTH AVE., 14TH FLOOR  
City-St-Zip: NEW YORK, NY 10018

Title: S ( ) Delete  
Name: SLOANE, BARRY  
Address: 462 SEVENTH AVE., 14TH FLOOR  
City-St-Zip: NEW YORK, NY 10018

Title: TD ( ) Delete  
Name: DOWD, MICHAEL J  
Address: 462 SEVENTH AVE., 14TH FLOOR  
City-St-Zip: NEW YORK, NY 10018

Title: D ( ) Delete  
Name: COHEN, SETH  
Address: 462 SEVENTH AVE., 14TH FLOOR  
City-St-Zip: NEW YORK, NY 10018

Title: CD ( ) Delete  
Name: COX, JOHN  
Address: 462 SEVENTH AVE., 14TH FLOOR  
City-St-Zip: NEW YORK, NY 10018

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: REARDON, THOMAS  
Address: 462 SEVENTH AVE., 14TH FLOOR  
City-St-Zip: NEW YORK, NY 10018

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 Section 119.07(3)(i), 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: PETER DOWNS

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

P

06/30/2005

\_\_\_\_\_ Date