2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000000770

Entity Name: ESSEX NATIONAL SECURITIES, INC

FILED Jan 24, 2007 Secretary of State

	iidi Eddexiii	William Coloon Tiles, IIVo.					
Current Principal Place of Business:				New Principal Place of Business:			
825 THIRD AVENUE NEW YORK, NY 10022				215 GATEWAY ROAD WEST NAPA, CA 94558			
Current Mailing Address:				New Mailing Address:			
825 THIRD AVENUE NEW YORK, NY 10022				215 GATEWAY ROAD WEST NAPA, CA 94558			
FEI Number: 13-3536697 FEI Number Applied For () FEI Nu				mber Not Applicable () Certificate of Status Desired ()			
Name and	Address of C	Current Registered Agent:		Name and	Address of New	Registered Agent:	
1201 HAYS TALLAHAS	S STREET SSEE, FL 323 named entity:	CE COMPANY 01 US submits this statement for the p	urpose of	⁻ changing it	s registered office	or registered agent, or both,	
SIGNATUR							
Election Can		nic Signature of Registered Age g Trust Fund Contribution ().	nt			Date	
OFFICERS	S AND DIREC	TORS:		ADDITION	S/CHANGES TO	OFFICERS AND DIRECTORS	:
Title: Name: Address: City-St-Zip:	CEO () NICHOLAS, FR 825 3RD AVE NEW YORK, N			Title: Name: Address: City-St-Zip:	CEO (X) Chai DAVIS, SCOTT K 215 GATEWAY ROA NAPA, CA 94558	nge()Addition D WEST	
Title: Name: Address: City-St-Zip:	VCOC () COONEY, JOH 215 GATEWAY NAPA, CA 945	RDW		Title: Name: Address: City-St-Zip:	COO (X) Char COONEY, JOHN 215 GATEWAY RD V NAPA, CA 94558	nge () Addition	
Title: Name: Address: City-St-Zip:	VCFT () CIANCARELLI, 825 THIRD AVE NEW YORK, N	ENUE		Title: Name: Address: City-St-Zip:	VCFT (X) Char COONEY, JOHN M 215 GATEWAY ROA NAPA, CA 94558	nge()Addition D WEST	
Title: Name: Address: City-St-Zip:	WADE, WILLIA	D ROAD SUITE 200		Title: Name: Address: City-St-Zip:	()Char	nge () Addition	
Title: Name: Address: City-St-Zip:	EISELE, CURT	RYN MAWR SUITE 800S		Title: Name: Address: City-St-Zip:	SVP (X) Char WEBER, KEITH J 2028 MAJESTIC CT. FT. COLLINS, CO 86		
Title: Name: Address: City-St-Zip:	S () GEDDES, MAR 215 GATEWAY NAPA, CA 945	ROAD WEST		Title: Name: Address: City-St-Zip:	()Char	nge () 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: MARGARET GEDDES S 01/24/2007