

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004363

Entity Name: NEW EDGE NETWORK, INC.

FILED
Apr 20, 2005
Secretary of State

Current Principal Place of Business:

3000 COLUMBIA HOUSE BLVD., SUITE 106
VANCOUVER, WA 98661

New Principal Place of Business:

3000 COLUMBIA HOUSE BLVD.
SUITE 106
VANCOUVER, WA 98661

Current Mailing Address:

3000 COLUMBIA HOUSE BLVD., SUITE 106
VANCOUVER, WA 98661

New Mailing Address:

3000 COLUMBIA HOUSE BLVD.
SUITE 106
VANCOUVER, WA 98661

FEI Number: 94-3331274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONSCORP REGISTERED AGENTS, INC.
526 E. PARK AVE.
TALLAHASSEE, FL 32301 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: PVTD () Delete
Name: MOFFAT, DANIEL G
Address: 3000 COLUMBIA HOUSE BLVD., SUITE 106
City-St-Zip: VANCOUVER, WA 98661

Title: S () Delete
Name: CLOWES, HOWARD
Address: 400 HAMILTON AVE.
City-St-Zip: PALO ALTO, CA 94301

Title: D () Delete
Name: GHREWALLA, ROB
Address: 85 BROAD ST. 10TH FLOOR
City-St-Zip: NEW YORK, NY 10004

Title: D () Delete
Name: SZE, DAVID
Address: 2929 CAMPUS DR 400
City-St-Zip: SAN MATEO, CA 94403

Title: D () Delete
Name: CASTELBLANCO, DAVID
Address: 85 BROAD ST, 10TH FL
City-St-Zip: NEW YORK, NY 10004

Title: D () Delete
Name: WAGNER, J. PETER
Address: 428 UNIVERSITY AVENUE
City-St-Zip: PALO ALTO, CA 94301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: GHEEWALLA, ROB
Address: 85 BROAD ST. 10TH FLOOR
City-St-Zip: NEW YORK, NY 10004

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: PENNY H. BEWICK

VP

04/20/2005

Electronic Signature of Signing Officer or Director

Date