2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K20155

Entity Name: POTOMAC FINANCIAL CORPORATION

FILED Apr 27, 2006 Secretary of State

_	10101010		•			
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	QUESAS CIR A, FL 34233	US				
Current Mailing Address:			New Maili	New Mailing Address:		
2344 BEE RIDGE RAOAD SUITE 115 SARASOTA, FL 34329 U)	5533 MARQUESAS CIRCLE SARASOTA, FL 34233 US			
		US				
FEI Number: 65-0055831		FEI Number Applied For ()	FEI Number Not Appl	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
	CHARD E QUESAS CIR A, FL 34233	US				
The above in the State		ubmits this statement for the p	urpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	RE:					
	Electroni	c Signature of Registered Age	ent	Date		
Election Carr	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title:	LEVINE, RICHAF 2344 BEE RDGE SARASOTA, FL VD () BARON, LOUIS: 11743 LOVEJON SILVER SPRING	E ROAD #115 34239 US Delete S., ⁄ ST	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title:	LEVINE, RICH 5533 MARQU SARASOTA, F	ESAS CIRCLE	
Name: Address: City-St-Zip: Title:	LEVINE, DEBOR 7733 RED CEDA SARASOTA, FL	AH M., AR LN 34241 US Delete	Name: Address: City-St-Zip: Title:	,) Change () Addition	
Name: Address:	KIRSHENBLATT 11 CAMPBELL A		Name: Address:			

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.

City-St-Zip:

SIGNATURE: RICHARD LEVINE P 04/27/2006

TORONTO, ONTARIO, CA L4J2J3 CA

City-St-Zip: