

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000000797

FILED
May 01, 2007
Secretary of State

Entity Name: NEWTEK INSURANCE AGENCY, LLC

Current Principal Place of Business:

1667 K STREET NW, SUITE 550
WASHINGTON, DC 20006

New Principal Place of Business:

1627 K STREET NW, 10TH FLOOR
WASHINGTON, DC 20006

Current Mailing Address:

1667 K STREET NW, SUITE 550
WASHINGTON, DC 20006

New Mailing Address:

1627 K STREET NW, 10TH FLOOR
WASHINGTON, DC 20006

FEI Number: 56-2383514 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SLOANE, BARRY
Address: 462 7TH AVENUE, 14TH FLOOR
City-St-Zip: NEW YORK, NY 10018

Title: MGR () Delete
Name: ABROMSON, ELLEN
Address: 1667 K STREET NW, SUITE 550
City-St-Zip: WASHINGTON, DC 20006

Title: MGR (X) Delete
Name: PAUL, LARRY
Address: 150 S. WASHINGTON STREET
City-St-Zip: CARPENTERSVILLE, IL 60110

Title: MGR (X) Delete
Name: ASH, MATTHEW
Address: 1667 K STREET NW, SUITE 550
City-St-Zip: WASHINGTON DC, 20006

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WILSHIRE DC PARTNERS, , LLC
Address: 1627 K STREET NW, 10TH FLOOR
City-St-Zip: WASHINGTON, DC 20006

Title: MGRM (X) Change () Addition
Name: NEWTEK BUSINESS SERV, ICES, INC.
Address: 1440 BROADWAY, 17TH FLOOR
City-St-Zip: NEW YORK, NY 10018

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BARRY SLOANE

CEOS

05/01/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date