2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17310

Entity Name: NEWSBANK, INC.

FILED Apr 24, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 58 PINE STREET 397 MAIN ST NEW CANAAN, CT 06840 CHESTER, VT 05143 US **Current Mailing Address: New Mailing Address:** 4501 TAMIAMI TRAIL NORTH, STE 316 NAPLES, FL 34103 US FEI Number: 06-1084869 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JONES, DANIEL S 4501 TAMIAMI TRAIL NORTH, STE. 316 NAPLES, FL 34103 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition Name: JONES, DANIEL S., Name: 4501 TAMIAMI TRAIL NORTH, STE. 316 Address: Address: City-St-Zip: NAPLES, FL 341033023 City-St-Zip: Title: Title: () Delete () Change () Addition MCDOWELL, JOHN A Name: Name: 4501 TAMIAMI TRAIL NORTH, STE. 316 Address: Address: NAPLES, FL 341033023 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition JONES, SUSAN G Name: Name: 4501 TAMIAMI TRAIL NORTH, STE. 316 Address: Address: City-St-Zip: NAPLES, FL 341033023 City-St-Zip: Title: () Delete Title: () Change () Addition WALKER, MICHAEL G Name: Name: Address: 397 MAIN STREET Address: City-St-Zip: CHESTER, VT 05143 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 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: MARY-ANN DELANEY VP 04/24/2007