



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State / Corporations Division

**Matthew A. Brown**

Secretary of State

April 27, 2006

Regent Street II, Inc.  
C/O CT Corporation System  
10 Weybosset Street  
Providence, RI 02903

Re: **ID 141800**  
Regent Street II, Inc.

**Corporations  
Division**

**Business Section**

Phone: 401-222-3040  
Fax: 401-222-1309  
corporations@sec.state.ri.us

**Business Information  
Center**

Phone: 401-222-2185  
Fax: 401-222-1309  
businessinfo@sec.state.ri.us

**Notary & Trademark  
Sections**

Phone: 401-222-1487  
Fax: 401-222-3879  
notaries@sec.state.ri.us  
trademarks@sec.state.ri.us

**UCC Section**

Phone: 401-222-3040  
Fax: 401-222-3879  
ucc@sec.state.ri.us

148 W. River Street  
Providence, RI  
02904-2615

**Office of the  
Secretary of State**

State House Room 217  
Providence, RI 02903

Phone: 401-222-2357  
Fax: 401-222-1356

[www.state.ri.us](http://www.state.ri.us)

To Whom It May Concern:

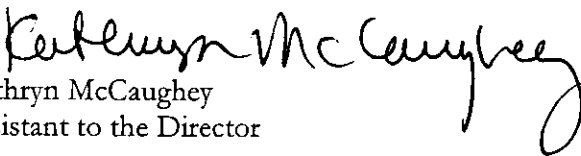
Our records indicate that a double payment was accepted and deposited from the above-referenced corporation for the filing of the 2006 Annual Report.

As a result, the corporation is entitled to a refund. Enclosed is the latter of the two annual reports filed, this being the report for which payment is to be refunded. A refund check will be forwarded to you from the State Treasurer's office. Please allow 4-6 weeks for processing.

If you have any questions, please feel free to contact Barry Chipman, Fiscal Manager, Office of the Secretary of State, Matthew A. Brown, 148 West River Street, Providence, RI 02904, PHONE: (401) 222-3040, FAX: (401) 222-3879, Email: [bchipman@sec.state.ri.us](mailto:bchipman@sec.state.ri.us).

Sincerely,

CORPORATIONS DIVISION

  
Kathryn McCaughey  
Assistant to the Director

Enc.



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Matthew A. Brown, Secretary of State  
Corporations Division  
148 W. River St., Providence, RI 02904-2615  
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2006

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

|                                                                                                                        |                                                  |             |               |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|-------------|---------------|
| 1. Corporate ID No.<br>141800                                                                                          | 2. Name of Corporation<br>Regent Street II, Inc. |             |               |
| 3. Street Address Principal Business Office<br>10 WEYBOSSET STREET                                                     | City<br>PROVIDENCE                               | State<br>RI | Zip<br>02903- |
| 4. Business Phone No.<br>4014440800                                                                                    | 5. State of Incorporation<br>DELAWARE            |             |               |
| 6. Brief Description of the Character of Business Conducted in Rhode Island<br>TO HOLD AND MANAGE LOANS AND SECURITIES |                                                  |             |               |

|                                                                                                                                             |             |                                                 |             |
|---------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------|-------------|
| 7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS |             |                                                 |             |
| President Name<br>Stacey A. Almond                                                                                                          |             | Vice President Name<br>Joseph P. Keough, Jr.    |             |
| Street Address<br>10 Weybosset Street Suite 301                                                                                             |             | Street Address<br>10 Weybosset Street Suite 301 |             |
| City<br>Providence                                                                                                                          | State<br>RI | City<br>Providence                              | State<br>RI |
| Zip<br>02903                                                                                                                                |             | Zip<br>02903                                    |             |
| Secretary Name<br>Nina Tai                                                                                                                  |             | Treasurer Name<br>Johnny E. Graves              |             |
| Street Address<br>231 S La Salle Street                                                                                                     |             | Street Address<br>901 Main St                   |             |
| City<br>Chicago                                                                                                                             | State<br>IL | City<br>Dallas                                  | State<br>TX |
| Zip<br>60604                                                                                                                                |             | Zip<br>75202                                    |             |

|                                                                                                                                              |             |                                                 |             |
|----------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------|-------------|
| 8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS |             |                                                 |             |
| Director Name<br>Stacey A. Almond                                                                                                            |             | Director Name<br>Joseph P. Keough, Jr.          |             |
| Street Address<br>10 Weybosset Street Suite 301                                                                                              |             | Street Address<br>10 Weybosset Street Suite 301 |             |
| City<br>Providence                                                                                                                           | State<br>RI | City<br>Providence                              | State<br>RI |
| Zip<br>02903                                                                                                                                 |             | Zip<br>02903                                    |             |
| Director Name<br>Justin R. Evans                                                                                                             |             | Director Name<br>James B. Freeze                |             |
| Street Address<br>10 Weybosset Street Suite 301                                                                                              |             | Street Address<br>100 N Tryon St                |             |
| City<br>Providence                                                                                                                           | State<br>RI | City<br>Charlotte                               | State<br>NC |
| Zip<br>02903                                                                                                                                 |             | Zip<br>28255                                    |             |

|                                                                        |              |           |                                                                     |              |           |
|------------------------------------------------------------------------|--------------|-----------|---------------------------------------------------------------------|--------------|-----------|
| 9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |              |           | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |              |           |
| AUTHORIZED SHARES                                                      |              |           | ISSUED SHARES                                                       |              |           |
| Number of Shares                                                       | Class/Series | Par Value | Number of Shares                                                    | Class/Series | Par Value |
| 1,000 COMM \$0.01 PAR VALUE                                            |              |           | None                                                                |              |           |

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

NULL & VOID



1 4 1 8 0 0

\*141800 FBC 02/23/06 04:13:24 PM\*

File Date 2/28/06

Check No. 1110

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Joseph P. Keough Jr. 2/23/2006  
Signature of Officer Date  
Joseph P. Keough Jr.  
Print or Type Name of Officer

Vice President  
Title of Officer

Form 630 12/05

**CORPORATE ID NO. 141800**

**Regent Street II, Inc.**

ATTACHMENT – Names and Addresses of the Officers

Justin R. Evans            Vice President  
10 Weybosset St Ste 301  
Providence, RI 02903

Marilyn J. Cellemme            Vice President  
10 Weybosset St Ste 301  
Providence, RI 02903

Marilyn J. Cellemme    Asst. Secretary  
10 Weybosset St Ste 301  
Providence, RI 02903

Justin R. Evans            Asst. Secretary  
10 Weybosset St Ste 301  
Providence, RI 02903

Angela M. Lowe            Asst. Secretary  
233 S 4<sup>th</sup> St Ste 305  
Las Vegas, NV 89101

Johnny E. Graves            Tax Officer  
901 Main St  
Dallas, TX 75202

ATTACHMENT – Names and Addresses of the Directors

Alfred S. Lombardi  
2800 Financial Plaza  
Providence, RI 02903

Robert J. Miller  
100 N Tryon Street  
Charlotte NC 28255

001110-028  
10/6/99