

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S37135

FILED  
Jul 29, 2005  
Secretary of State

Entity Name: EW KNOWLEDGE PRODUCTS, INC.

**Current Principal Place of Business:**

3 PARK AVE.  
33RD FLOOR  
NEW YORK, NY 10016

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DICE INC LEGAL  
3 PARK AVE 33RD FLOOR  
NEW YORK, NY 10016

**New Mailing Address:**

C/O DICE INC LEGAL  
3 PARK AVE, 33RD FLOOR  
NEW YORK, NY 10016

FEI Number: 59-3052351

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324 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: CEO ( ) Delete  
Name: MELLAND, SCOT,  
Address: 276 NEW NORRWALK RD.  
City-St-Zip: NEW CANAAN, CT 06840

Title: CFO ( ) Delete  
Name: DURNEY, MIKE,  
Address: 44 DORCHESTER RD.  
City-St-Zip: ROCKVILLE CENTRE, NY 11570

Title: S ( ) Delete  
Name: CAMPBELL, BRIAN  
Address: 9 MALLARD DR.  
City-St-Zip: HUNTINGTON, NY 11743

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: MELLAND, SCOT,  
Address: 276 NEW NORRWALK RD.  
City-St-Zip: NEW CANAAN, CT 06840

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

Title: SVP (X) Change ( ) Addition  
Name: CAMPBELL, BRIAN,  
Address: 9 MALLARD DR.  
City-St-Zip: HUNTINGTON, NY 11743

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: BRIAN P. CAMPBELL

SVP

07/29/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date