

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000000966

FILED
Feb 07, 2009
Secretary of State

Entity Name: SLC NEWPORT, INC.

Current Principal Place of Business:

5426 BAY CENTER DR, SUITE 600
TAMPA, FL 33609 US

New Principal Place of Business:

Current Mailing Address:

5426 BAY CENTER DR, SUITE 600
TAMPA, FL 33609 US

New Mailing Address:

FEI Number: 36-4120851 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATTION SYSTEM
1200 PINE ISLAND ROAD
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: COOV () Delete
Name: BENJAMIN, STEPHEN
Address: 5426 BAY CENTER DR, SUITE 600
City-St-Zip: TAMPA, FL 33609 US

Title: CCEO () Delete
Name: BEST, THILO D
Address: 5426 BAY CENTER DR, SUITE 600
City-St-Zip: TAMPA, FL 33609 US

Title: PCFO () Delete
Name: DELUCA, JON A
Address: 5426 BAY CENTER DR, SUITE 600
City-St-Zip: TAMPA, FL 33609 US

Title: VS () Delete
Name: EZER, ROBERT
Address: 100 MILVERTON DR, SUITE 700
City-St-Zip: MISSISSAUGA, ONTARIO CANADA, L5R 4H1

Title: V () Delete
Name: SUSKE, STEPHEN
Address: 100 MILVERTON DR, SUITE 700
City-St-Zip: MISSISSAUGA, ONTARIO CANADA, L5R 4H1

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VS (X) Change () Addition
Name: BINIONS, BRENT
Address: 100 MILVERTON DR, SUITE 700
City-St-Zip: MISSISSAUGA, ON L5R 4H1 CA

Title: V (X) Change () Addition
Name: SUSKE, STEPHEN
Address: 100 MILVERTON DR, SUITE 700
City-St-Zip: MISSISSAUGA, ON L5R 4H1 CA

Title: V () Change (X) Addition
Name: MAINGOT, CHRISTIAN
Address: 5426 BAY CENTER DR SUITE 600
City-St-Zip: TAMPA, FL 33609

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: JON A DELUCA

_____ Electronic Signature of Signing Officer or Director

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02/07/2009

_____ Date