

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000055602

Entity Name: NEWTON WORKS, INC.

FILED  
Apr 19, 2005  
Secretary of State

## Current Principal Place of Business:

28481 LA HWY 441  
HOLDEN, CA 70744

## New Principal Place of Business:

245 W MAGNOLIA STREET  
CLERMONT, FL 34711

## Current Mailing Address:

28481 LA HWY 441  
HOLDEN, CA 70744

## New Mailing Address:

245 W MAGNOLIA STREET  
CLERMONT, FL 34711

FEI Number: 81-0550999

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STOKES, BERYL N III  
STOKES ACCOUNTING  
1035 W. DIXIE AVE  
LEESBURG, FL 34748 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: PSTD ( ) Delete  
Name: NEWTON, JOHN  
Address: 378 WEST OSCEOLA STREET  
City-St-Zip: CLERMONT, FL 34711

Title: V ( ) Delete  
Name: NEWTON, KRYSTYN  
Address: 378 WEST OSCEOLA STREET  
City-St-Zip: CLERMONT, FL 34711

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: NEWTON, JOHN  
Address: 245 W MAGNOLIA STREET  
City-St-Zip: CLERMONT, FL 34711

Title: V (X) Change ( ) Addition  
Name: NEWTON, KRYSTYN  
Address: 245 W MAGNOLIA STREET  
City-St-Zip: CLERMONT, FL 34711

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: KRYSTYN NEWTON

VPRE

04/19/2005

Electronic Signature of Signing Officer or Director

Date