

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000030949

FILED  
Apr 22, 2008  
Secretary of State

Entity Name: REGWAY, INC.

**Current Principal Place of Business:**

1030 HOWELL AVE.  
BROOKSVILLE, FL 34601 US

**New Principal Place of Business:**

**Current Mailing Address:**

1522 SABRA DRIVE  
BROOKSVILLE, FL 34601 US

**New Mailing Address:**

FEI Number: 20-0800264      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MARTIN, REGINA B  
1522 SABRA DR  
BROOKSVILLE, FL 34601 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: P ( ) Delete  
Name: MARTIN, REGINA B  
Address: 1522 SABRA DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: VP ( ) Delete  
Name: MOTT, KATRINA M  
Address: 10216 MORNINGSTAR AVE  
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: SEC ( ) Delete  
Name: MARTIN, HORACE W JR  
Address: 4726 SUNRISE RD  
City-St-Zip: SAINT PETERSBURG, FL 33705 US

Title: TRES ( ) Delete  
Name: MARTIN, REGINA B  
Address: 1522 SABRA DR  
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: D ( ) Delete  
Name: MARTIN, HORACE W SR  
Address: 1522 SABRA DR  
City-St-Zip: BROOKSVILLE, FL 34601

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: REGINA B MARTIN

P

04/22/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date