2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 459820

Apr 27, 2004 Secretary of State

Entity Name: NEWPORT OF FLORIDA, INC. **Current Principal Place of Business: New Principal Place of Business:** 1913 S OAKMONT AVE TAMPA, FL 33629 **Current Mailing Address: New Mailing Address:** 1913 S OAKMONT AVE TAMPA, FL 33629 FEI Number: 59-1549369 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ABDONEY, MICHAEL O 1913 S OAKMONT AVE TAMPA, FL 33629 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ABODNEY, MICHAEL O Name: Name: 1913 S OAKMONT AVE Address: Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: Title: Title: () Change () Addition () Delete ABDONEY, REBECCA Name: Name: 1913 S OAKMONT AVE Address: Address: TAMPA, FL 33629 City-St-Zip: City-St-Zip:

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: MICHAEL O. ABDONEY PD 04/27/2004