

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 587569

Entity Name: NEWMAN'S 76, INC.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

2802 CAPITAL CIR NE
TALLAHASSEE, FL 32308

New Principal Place of Business:

2803 CAPITAL CIR NE
TALLAHASSEE, FL 32308

Current Mailing Address:

2802 CAPITAL CIR NE
TALLAHASSEE, FL 32308

New Mailing Address:

2803 CAPITAL CIR NE
TALLAHASSEE, FL 32308

FEI Number: 59-1847510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NEWMAN, CHRISTEL M.
710 WESTWAY ROAD
TALLAHASSEE, FL
TALLAHASSEE, FL 32310 US

Name and Address of New Registered Agent:

NEWMAN, CHRISTEL M.
710 WESTWAY ROAD
TALLAHASSEE, FL
TALLAHASSEE, FL 32305 US

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: CHRISTEL M NEWMAN

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: NEWMAN, EUGENE G
Address: 710 WESTWAY ROAD
City-St-Zip: TALLAHASSEE, FL 32305

Title: PD () Delete
Name: NEWMAN, RODNEY G.
Address: 5727 SIOUX DR
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: SD () Delete
Name: NEWMAN, CHRISTEL M.
Address: 710 WESTWAY RD.
City-St-Zip: TALLAHASSEE, FL

Title: T () Delete
Name: NEWMAN, STACIE D
Address: 185 ANN CIR.
City-St-Zip: CRAWFORDVILLE, FL 32327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: NEWMAN, RODNEY G.
Address: 5727 SIOUX DR
City-St-Zip: TALLAHASSEE, FL 32317

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: CHRISTEL M NEWMAN

SECR

04/16/2009

Electronic Signature of Signing Officer or Director

Date