

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Feb 17 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **833709** (9)  
1. Corporation Name  
**NEWTON, INC.**



Principal Place of Business <b>8183 W EL CAJON DRIVE BATON ROUGE LA 70815</b>	Mailing Address <b>8183 W EL CAJON DRIVE BATON ROUGE LA 70815</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>01/23/1975</b>	
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number <b>72-0731212</b>		Applied For Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
24. Country	25. Country	29. Zip		30. Country	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	<b>FL</b>
85. Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>THOMAS, NEWTON B</b>	
STREET ADDRESS	<b>12880 SPRINGVIEW AVE.</b>	
CITY-ST-ZIP	<b>BATON ROUGE LA</b>	
TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>FERRO, ANTHONY P</b>	
STREET ADDRESS	<b>2810 RIDGEWOOD STREET</b>	
CITY-ST-ZIP	<b>NEDERLAND, TX 00000</b>	
TITLE	<b>ST</b>	<input type="checkbox"/> DELETE
NAME	<b>FERRO, BEVERLY</b>	
STREET ADDRESS	<b>2810 RIDGEWOOD ST.</b>	
CITY-ST-ZIP	<b>NEDERLAND TX</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> DELETE
NAME	<b>OATLEY, DAVID A.</b>	
STREET ADDRESS	<b>11933 PARKBROOK AVE</b>	
CITY-ST-ZIP	<b>BATON ROUGE LA</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

*DAVID A. OATLEY*

*2/17/98 504-927-8921*

CR2E034 (10/97)