

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 833709

Entity Name: NEWTRON, INC.

FILED  
Apr 16, 2010  
Secretary of State

**Current Principal Place of Business:**

8183 W EL CAJON DRIVE  
BATON ROUGE, LA 70815

**New Principal Place of Business:**

**Current Mailing Address:**

8183 W EL CAJON DRIVE  
BATON ROUGE, LA 70815

**New Mailing Address:**

FEI Number: 72-0731212

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REGISTERED AGENT SOLUTIONS, INC.  
155 OFFIE PLAZA DRIVE  
SUITE A  
TALLAHASSEE, FL 32301 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: DIR  
Name: THOMAS, NEWTON B  
Address: 8183  
City-St-Zip: W. EL CAJON DRIVE, LA 70815

Title: PRES  
Name: FERR0, ANTHONY P  
Address: 8183 W. EL CAJON DRIVE  
City-St-Zip: BATON ROUGE, LA 70815

Title: SEC  
Name: OATLEY, DAVE  
Address: 8183 W. EL CAJON DRIVE  
City-St-Zip: BATON ROUGE, LA 70815

Title: MAN  
Name: PARSONS, GLEN  
Address: 8183 W. EL CAJON DRIVE  
City-St-Zip: BATON ROUGE, LA 70815

Title: MAN  
Name: SMITH, JOHN  
Address: 8183 W. EL CAJON DRIVE  
City-St-Zip: BATON ROUGE, LA 70815

I hereby 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 all other like empowered.

SIGNATURE: HUNTER HOLLINS

AGEN

04/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date