2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001660

Entity Name: H.E. NEWELL, INC.

FILED Jan 09, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5721 B HWY 90 W
THEODORE, AL 36582

5721 HWY 90 W
SUITE B

THEODORE, AL 36582

Current Mailing Address: New Mailing Address:

PO BOX 1680

THEODORE, AL 365901680

FEI Number: 63-1219049 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 NEWELL, HARRY E
 Name:
 SYRON, A JOSEPH

 Address:
 10375 FRANKLIN LANE
 Address:
 1671 AUGUSTA DR W

 City-St-Zip:
 WILMER, AL 36587
 City-St-Zip:
 MOBILE, AL 36695

Title: V () Delete Title: () Change () Addition

 Name:
 LYLE, JAMES T
 Name:

 Address:
 791 WHITTINGTON DR
 Address:

 City-St-Zip:
 MOBILE, AL 36695
 City-St-Zip:

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 SYRON, A. JOSEPH
 Name:
 SIKES, CHERYL F

 Address:
 1671 AUGUSTA DR W
 Address:
 3470 SERENA CIRCLE S

 City-St-Zip:
 MOBILE, AL 36695
 City-St-Zip:
 CHUNCHULA, AL 36521

I hereby certify that the information supplied with this filing does not qualify for the 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: A JOSEPH SYRON P 01/09/2007