

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000005301

FILED
Jan 08, 2009
Secretary of State

Entity Name: C.K. NEWCOMB & ASSOCIATES, INC.

Current Principal Place of Business:

1501 NORTH MARGINAL ROAD
CLEVELAND, OH 44114

New Principal Place of Business:

1501 NORTH MARGINAL ROAD
#166
CLEVELAND, OH 44114

Current Mailing Address:

1501 NORTH MARGINAL ROAD
CLEVELAND, OH 44114

New Mailing Address:

1501 NORTH MARGINAL ROAD
#166
CLEVELAND, OH 44114

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

Name and Address of Current Registered Agent:

NEWCOMB, CHARLES K
4521 CANOPY ROAD
PENSACOLA, FL 325047801 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: PC () Delete
Name: NEWCOMB, CHARLES K
Address: 4521 CANOPY ROAD
City-St-Zip: PENSACOLA, FL 325047801

Title: ST () Delete
Name: NEWCOMB, VIRGINIA
Address: 4521 CANOPY ROAD
City-St-Zip: PENSACOLA, FL 325047801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change () Addition
Name: NEWCOMB, VIRGINIA B
Address: 4521 CANOPY ROAD
City-St-Zip: PENSACOLA, FL 325047801

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: VIRGINIA B. NEWCOMB

ST

01/08/2009

Electronic Signature of Signing Officer or Director

_____ Date