

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H04205

FILED
Apr 28, 2006
Secretary of State

Entity Name: NEWPORT COMMUNICATIONS, INC.

Current Principal Place of Business:

25 HOMESTEAD RD N
UNIT 29
LEHIGH ACRES, FL 33936 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 417
LEHIGH ACRES, FL 339707417 US

New Mailing Address:

FEI Number: 59-2417587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REYNOLDS, A BRINTON, JR
801 N. LEEKLAND HTS BLVD.
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

REYNOLDS, A BRINTON, JR
801 N. LEELAND HTS BLVD.
LEHIGH ACRES, FL 33936 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:

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: HODDE, CHARLES G.,
Address: 1121 RUSHMORE AVE S.
City-St-Zip: LEHIGH ACRES, FL

Title: VD () Delete
Name: HODDE, CHARLES G. JR.,
Address: 10589 ROXBURY CT
City-St-Zip: LEHIGH ACRES, FL

Title: SD () Delete
Name: HODDE, E. ADELAIDE,
Address: 1121 RUSHMORE AVE S.
City-St-Zip: LEHIGH ACRES, FL

Title: D () Delete
Name: CALIA, M. A.,
Address: 145 PALMER AVE.
City-St-Zip: RIVERSIDE, RI

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: CHARLES G HODDE JR

VP

04/28/2006

Electronic Signature of Signing Officer or Director

Date