FILED Jan 07, 2008 08:00 AN Secretary of State **2008 FOR PROFIT CORPORATION ANNUAL REPORT** DOCUMENT # H09994 1. Entity Name WILLIAM H. NEWTON, III, P.A. Principal Place of Business Mailing Address % WILLIAM H. NEWTON, III % WILLIAM H. NEWTON, III 4300 GRANADA BLVD 4300 GRANADA BLVD CORAL GABLES, FL 33146 CORAL GABLES, FL 33146 CR2E034 (11/05) No Cha-P 01042008 DO NOT WRITE IN THIS SPACE 4. FEI Number 59-2418214 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent NEWTON, WILLIAM H., III DO NOT WRITE 4300 GRANDA BLVD CORAL GABLES, FL 33146 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing

Trust Fund Contribution.

U00000774133

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

\$5.00 May Be

Added to Fees

12.	I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if
	changed, or on an attachment with an address, with all other like empowered.

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee will be \$550.00

NEWTON, WILLIAM H., III

4300 GRANADA BLVD

CORAL GABLES, FL

OFFICERS AND DIRECTORS

10.

TITLE

NAME STREET ADDRESS

TOTLE

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

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