

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 29, 2005 8:00 am**  
**Secretary of State**

04-29-2005 90181 016 \*\*\*150.00

30044785



<b>DOCUMENT # H18732</b> 1. Entity Name <b>NEWLON &amp; COMPANY, INC.</b>																																																																																																																	
Principal Place of Business <b>3817 N. LAKE ORLANDO PARKWAY ORLANDO, FL 32808</b>			Mailing Address <b>3817 N. LAKE ORLANDO PARKWAY ORLANDO, FL 32808</b>																																																																																																														
2. Principal Place of Business <b>3595 W. Lake Mary Blvd.</b>		3. Mailing Address <b>3595 W. Lake Mary Blvd.</b>																																																																																																															
Suite, Apt. #, etc. <b>Suite "A"</b>		Suite, Apt. #, etc. <b>Suite "A"</b>																																																																																																															
City & State <b>Lake Mary, FL</b>		City & State <b>Lake Mary, FL</b>		4. FEI Number <b>59-2471608</b>																																																																																																													
Zip <b>32746</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																																																																																																													
6. Name and Address of Current Registered Agent  <b>NEWLON, JAMES H. 3817 N. LAKE ORLANDO PARKWAY ORLANDO, FL 32808 3595 W. Lake Mary Blvd., Suite A Lake Mary, FL 32746</b>			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> Zip Code _____																																																																																																														
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 <b>James H. Newlon</b> <span style="float: right;">4/27/05</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																	
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																																																																																																															
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">PTD NEWLON, JAMES H.</td> <td style="width: 40%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"><b>3817 N. LAKE ORLANDO PKW ORLANDO, FL</b></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td>S</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2">NEWLON, JAMES R.</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">304 LOG RUN COURT</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">OCOE, FL</td> </tr> <tr> <td>TITLE</td> <td>V</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2">LEGETTE, YOMA D</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">3595 W. LAKE MARY BLVD STE A</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">LAKE MARY, FL 32746</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> </table> </div> <div style="width: 48%;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;"></td> <td style="width: 40%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"><b>3595 W. Lake Mary Blvd., Suite A Lake Mary, FL 32746</b></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> </table> </div> </div>						TITLE	PTD NEWLON, JAMES H.	<input type="checkbox"/> Delete	NAME			STREET ADDRESS	<b>3817 N. LAKE ORLANDO PKW ORLANDO, FL</b>		CITY-ST-ZIP			TITLE	S	<input type="checkbox"/> Delete	NAME	NEWLON, JAMES R.		STREET ADDRESS	304 LOG RUN COURT		CITY-ST-ZIP	OCOE, FL		TITLE	V	<input type="checkbox"/> Delete	NAME	LEGETTE, YOMA D		STREET ADDRESS	3595 W. LAKE MARY BLVD STE A		CITY-ST-ZIP	LAKE MARY, FL 32746		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS	<b>3595 W. Lake Mary Blvd., Suite A Lake Mary, FL 32746</b>		CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.																																																																																																																	
<b>SIGNATURE:</b> <b>James H. Newlon President</b> <span style="float: right;">4/27/05 (407) 321-0400</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																	