

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000025927

**FILED**  
**May 17, 2008**  
**Secretary of State**

**Entity Name:** NEWPORT CAPITAL MANAGEMENT, LLC

**Current Principal Place of Business:**

2051 AUTUMN LN  
VERO BEACH, FL 32963 US

**New Principal Place of Business:**

7492 SE LAQUE CIRCLE  
STUART, FL 34997 US

**Current Mailing Address:**

2051 AUTUMN LN  
VERO BEACH, FL 32963 US

**New Mailing Address:**

7492 SE LAQUE CIRCLE  
STUART, FL 34997 US

**FEI Number:** 30-0240298      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

LIANO, KEN  
2051 AUTUMN LN  
VERO BEACH, FL 32963 US

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

LIANO, KEN  
7492 SE LAQUE CIRCLE  
STUART, FL 34997 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

05/17/2008

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LIANO, KEN  
Address: 2051 AUTUMN LN  
City-St-Zip: VERO BEACH, FL 32963 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LIANO, KEN  
Address: 7492 SE LAQUE CIRCLE  
City-St-Zip: STUART, FL 34997 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KEN LIANO

MGRM

05/17/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date