

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000059506

Entity Name: NEWPORT REALTY, L.L.C.

FILED  
Mar 21, 2009  
Secretary of State

## Current Principal Place of Business:

C/O MARK KNAUF, 2230 S. MCCALL ROAD  
ENGLEWOOD, FL 34224

## New Principal Place of Business:

3579 S ACCESS ROAD  
SUITE G  
ENGLEWOOD, FL 34224

## Current Mailing Address:

C/O MARK KNAUF, 2230 S. MCCALL ROAD  
ENGLEWOOD, FL 34224

## New Mailing Address:

3579 S ACCESS ROAD  
SUITE G  
ENGLEWOOD, FL 34224

FEI Number: 20-1507687

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PORTER, SHERRY LYNN  
C/O MARK KNAUF, 2230 S. MCCALL ROAD  
ENGLEWOOD, FL 34224 US

## Name and Address of New Registered Agent:

PORTER, SHERRY LYNN  
3579 S ACCESS ROAD  
SUITE G  
ENGLEWOOD, FL 34224 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: SHERRY LYNN PORTER

03/21/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: ROBERTS, K STEVEN SEC  
Address: C/O MARK KNAUF, 2230 S. MCCALL ROAD  
City-St-Zip: ENGLEWOOD, FL 34224

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: PORTER, SHERRY LYNN  
Address: 3579 S ACCESS ROAD, SUITE G  
City-St-Zip: ENGLEWOOD, FL 34224

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: SHERRY LYNN PORTER

MGRM

03/21/2009

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