

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000010460

Entity Name: NEWPORT GRAND INVESTMENTS, INC.

FILED
Jan 09, 2009
Secretary of State

Current Principal Place of Business:

470 COLUMBIA DRIVE, SUITE D-201
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

470 COLUMBIA DRIVE, SUITE D-201
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 05-0502761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREBOOM, DOUGLASS E
470 COLUMBIA DRIVE, SUITE D-201
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SILVESTER, RENEE T
Address: 529 S. FLAGLER DR., APT. 6-E
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VSD () Delete
Name: SILVESTER, ARTHUR W JR
Address: 8 OLIVER HAZARD PERRY ROAD
City-St-Zip: PORTSMOUTH, RI 02871

Title: TD () Delete
Name: HURLEY, DIANE
Address: 827 EAST MAIN ROAD
City-St-Zip: JAMESTOWN, RI 02835

Title: D () Delete
Name: HURLEY, KIMBERLY
Address: 9 MOUNT VERNON SQUARE
City-St-Zip: BOSTON, MA 02108

Title: D () Delete
Name: HURLEY, STEPHEN NAXH
Address: 5600 ALPINE ROAD
City-St-Zip: PORTOLA, CA 94028

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:

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

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 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: ARTHUR W. SILVESTER, JR.

VSD

01/09/2009

Electronic Signature of Signing Officer or Director

Date