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Secretary of State
05-22-2007 90017 031 ***150.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000025577

1. Entity Name
NEWMAN CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
#10 RD SALEM, FL 32356	PO BOX 202 SALEM, FL 32356

DO NOT WRITE IN THIS SPACE

05032007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3753354
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NEWMAN, WILLIAM M JR
10155, #10 RD.
SALEM, FL 32356

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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: William M. Newman Jr
Signature, typed or printed name of registered agent (and title if applicable). (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	NEWMAN, WILLIAM M JR
STREET ADDRESS	PO BOX 202
CITY-ST-ZIP	SALEM, FL 32356
TITLE	ST
NAME	NEWMAN, CINAMENT L
STREET ADDRESS	PO BOX 202
CITY-ST-ZIP	SALEM, FL 32356
TITLE	VP
NAME	NORTON, JIMMY
STREET ADDRESS	PO BOX 202
CITY-ST-ZIP	SALEM, FL 32356
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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 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.

SIGNATURE: William M. Newman Jr. 6/3/01 850 584-9267
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #