

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000076258

1. Entity Name

NEW TRAIN PROPERTY, INC.



Principal Place of Business

**3535 FIRST AVE N.
ST. PETERSBURG, FL 33713**

Mailing Address

**3535 FIRST AVE N.
ST. PETERSBURG, FL 33713**

DO NOT WRITE IN THIS SPACE



04262006

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4. FEI Number

59-3735178

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75

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6. Name and Address of Current Registered Agent

**NEWMAN, KEITH
3535 FIRST AVE N
ST PETERSBURG, FL 33713**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

000000551910

05/13/06-80118-023 150.00

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00

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10.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PD

NEWMAN, KEITH

3535 FIRST AVE N

SAINT PETERSBURG, FL 33713

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

T

NEWMAN, PRISCILLA

3535 FIRST AVE N

SAINT PETERSBURG, FL 33713

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/27/06

727-327-6608