2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000082008

Address: City-St-Zip:

HEATHROWW, FL 327465028

Entity Name: NEWPORT CONSULTING, INC.

Apr 29, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 300 INTERNATIONAL PKWY STE 270 HEATHROWW, FL 327465028 **Current Mailing Address: New Mailing Address:** 300 INTERNATIONAL PKWY STE 270 HEATHROWW, FL 327465028 FEI Number: 65-1166593 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DEAN MEAD SERVICES, LLC CAHALL, PETER S 800 N MAGNOLIA AVE STE 1500 300 INTÉRNATIONAL PARKWAY ORLANDO, FL 328033276 US SUITE 270 HEATHROW, FL 327465028 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: PETER S. CAHALL 04/29/2003 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CAHALL, PETER S Name: Name: 300 INTERNATIONAL PKWY STE 270 Address: Address: City-St-Zip: HEATHROWW, FL 327465028 City-St-Zip: () Delete Title: Title: () Change () Addition Name: CAMPISI, JAMES M Name: 300 INTERNATIONAL PKWY STE 270 Address: Address: HEATHROWW, FL 327465028 City-St-Zip: City-St-Zip: Title: Title: D () Delete () Change () Addition MELZER, MENDEL M Name: Name: 300 INTERNATIONAL PKWY STE 270 Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: PETER S. CAHALL 04/29/2003 DIR