

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000134563

1. Entity Name
 NEWBERRY TILE & MARBLE INSTALLATION, INC.



Principal Place of Business
 1861 EXMORE AVE.
 DELTONA, FL 32725

Mailing Address
 1861 EXMORE AVE.
 DELTONA, FL 32725



03032006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 04-3730579

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NEWBERRY, GREG L
 1861 EXMORE AVE.
 DELTONA, FL 32725

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

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

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	NEWBERRY, GREG L
STREET ADDRESS	1861 EXMORE AVE.
CITY-ST-ZIP	DELTONA, FL 32725
TITLE	V
NAME	NEWBERRY, LINDA
STREET ADDRESS	1861 EXMORE AVE.
CITY-ST-ZIP	DELTONA, FL 32725
TITLE	S
NAME	NEWBERRY, SHAWN
STREET ADDRESS	1861 EXMORE AVE.
CITY-ST-ZIP	DELTONA, FL 32725
TITLE	T
NAME	NEWBERRY, HEATHER
STREET ADDRESS	1861 EXMORE AVE.
CITY-ST-ZIP	DELTONA, FL 32725
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100000461587
 10/21/06-00001-017 150.00

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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: Gregory Newberry 3/6/06 Date Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR