

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 19, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000118604

1. Entity Name  
NEWBOLD ELECTRIC CONSTRUCTION,  
INCORPORATED



Principal Place of Business

6983 SE 85 LANE  
OCALA, FL 34472

Mailing Address

6983 SE 85 LANE  
OCALA, FL 34472



01052005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-0345079

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

NEWBOLD, MICHAEL B  
6983 SE 85 LANE  
OCALA, FL 34472

**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 reconstituting)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 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 NEWBOLD, MICHAEL B  
STREET ADDRESS 6983 SE 85 LANE  
CITY-ST-ZIP OCALA, FL 34472

TITLE V  
NAME NEWBOLD, BENJAMIN R  
STREET ADDRESS 6783 SE 88 ST  
CITY-ST-ZIP OCALA, FL 34472

TITLE ST  
NAME NEWBOLD, ELAINE  
STREET ADDRESS 6983 SE 85 LANE  
CITY-ST-ZIP OCALA, FL 34472

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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02/19/05-80025-009 158.75

**DO NOT WRITE  
IN THIS SPACE**

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

*Michael B. Newbold* Michael B. Newbold 2-15-05 352-347-77

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #