## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000128348

Entity Name: NEWAY SYSTEMS & PRODUCTS, INC.

FILED May 04, 2009 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	/ICKBAM RD.			ICKHAM RD.		
#12-108			#12-108	iora i anno.		
MELBOURNE, FL 32941			MELBOUF	MELBOURNE, FL 32941		
Current Mailing Address:			New Mail	New Mailing Address:		
UPS. BOX 108 MELBOURNE, FL 32941				P. O. BOX 411161 MELBOURNE, FL 32941		
WILLBOOK	(INE, I E 52541		WILLBOOK	(NL, 1 L 32341		
FEI Number	: 90-0141045	FEI Number Applied For ( )	FEI Number Not App	licable ( ) Certificate of Status Desi	red ( )	
Name and	d Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent	:	
	S, ROY O DR. ISERVATION F	PL #205				
	RNE, FL 32934					
	e named entity s e of Florida.	submits this statement for the	purpose of changing	ts registered office or registered agen	t, or botl	
SIGNATU	RE:					
	Electron	ic Signature of Registered Ag	ent	Date		
		3(2)(b), F.S., the corporation did n	ot receive the prior notic	e.		
	mpaign Financing S AND DIREC	g Trust Fund Contribution(). TORS:	ADDITIO	IS/CHANGES TO OFFICERS AND D	IRECTO	
Title:	PD ()	Delete	Title:	( ) Change ( ) Addition		
Name:	MANNING, ROY		Name:	( ) change ( ) / daliter		
Address:		/ATION PL. #2051	Address:			
City-St-Zip:	MELBOURNE,		City-St-Zip:			
Title:	VP ()	Delete	Title:	VP (X) Change ( ) Addition		
Name:	MANNING, RAY	OIII	Name:	MANNING, ROY O III		
Address:	3251 CONSER	ATION PL. #205	Address:	3251 CONSERVATION PL. #205		
City-St-Zip:	MELBOURNE,	FL 32934	City-St-Zip:	MELBOURNE, FL 32934		
Title:	VP ( )	Delete	Title:	VP (X) Change ( ) Addition		
Name:	MANNING, ELIZ	ABETH M	Name:	MANNING, ELIZABETH M		
Address:	14755 CHICAG	O AVE. #2	Address:	P. O. BOX 18400,		
City-St-Zip:	BURNSVILLE, I	/IN 55306	City-St-Zip:	WEST ST. PAUL STATION, MN 55118		
Title:	, ,	Delete	Title:	( ) Change ( ) Addition		
Name:	MANNING, CHA		Name:			
Address:	14755 CHICAG	O AVE. #2	Address:			
City-St-Zip:	BURNSVILLE, I	MN 55306	City-St-Zip:			
Title:		Delete	Title:	VP (X) Change ( ) Addition		
Name:	MANNING, EDV	V L	Name:	MANNING, EDW L		
Address:	1529 OAK ST.		Address:	1529 OAK ST.		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: FLOWOOD, MS 39232

SIGNATURE: ROY OTHWORTH MANNING DR. 05/04/2009

City-St-Zip: FLOWOOD, MS 39232