2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000073754

Entity Name: NEWELL MARINE INC

P.O. BOX 8571

SOUTHPORT, FL 32409

Address: City-St-Zip: FILED Apr 11, 2009 Secretary of State

y rea		WIN WELLING.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
219 3RD STREET SOUTHPORT, FL 32409			219 3RD ST. SOUTHPORT, FL 32	219 3RD ST. SOUTHPORT, FL 32409	
Current Mailing Address:			New Mailing Address:		
P.O. BOX 8571 SOUTHPORT, FL 32409			1441 3RD ST. SOUTHPORT, FL 32409		
FEI Number	: 59-2944996	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	FFREY A RROW RD. N, FL 32438	US			
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () NEWELL, MICH P.O. BOX 8571 SOUTHPORT, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () NEWELL, HENF P.O. BOX 8571 SOUTHPORT, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	ST () NEWELL, PATR	Delete IICIA A	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: PATRICIA NEWELL ST 04/11/2009