


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008 8:00 am
Secretary of State

02-04-2008 90055 023 ***150.00

DOCUMENT # P04000158825 1. Entity Name STEPHEN M. NEWMAN, P.A.					
Principal Place of Business 109D PALM BAY DRIVE PALM BEACH GARDENS, FL 33418			Mailing Address 109D PALM BAY DRIVE PALM BEACH GARDENS, FL 33418		
2. Principal Place of Business - No P.O. Box # 7121 Fairway Drive		3. Mailing Address 7121 Fairway Drive			
Suite, Apt. #, etc. Suite 203		Suite, Apt. #, etc. Suite 203			
City & State Palm Beach Gardens, FL		City & State Palm Beach Gardens, FL			
Zip 33418	Country USA	Zip 33418	Country USA	4. FEI Number 20-1909776	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Stephen M. Newman Street Address (P.O. Box Number is Not Acceptable) 7121 Fairway Drive, Suite 203 City Palm Beach Gardens FL Zip Code 33418		
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 <u>Stephen M. Newman</u> <i>Stephen M. Newman</i> 1-28-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD NEWMAN, STEPHEN M ESQ. 109D PALM BAY DRIVE PALM BEACH GARDENS, FL 33418		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD NEWMAN, GAYLE 109D PALM BAY DRIVE PALM BEACH GARDENS, FL 33418		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u>Stephen M. Newman</u> <i>Stephen M. Newman</i>			1-28-08 561-691-5424		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		