

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000109433

Entity Name: W.S. NEWBERN, INC.

**FILED**  
**Apr 15, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2982 E GIVERNY CIR  
TALLAHASSEE, FL 32309 US

**New Principal Place of Business:**

**Current Mailing Address:**

2982 E GIVERNY CIR  
TALLAHASSEE, FL 32309 US

**New Mailing Address:**

FEI Number: 84-1693416

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NEWBERN, W. SCOTT III  
2982 E GIVERNY CIR  
TALLAHASSEE, FL 32309 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NEWBERN, W. SCOTT PRES  
Address: 2982 E GIVERNY CIR  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: ST  
Name: NEWBERN, SALLY H SECTRES  
Address: 2982 E GIVERNY CIR  
City-St-Zip: TALLAHASSEE, FL 32309 US

I hereby 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 all other like empowered.

SIGNATURE: W. SCOTT NEWBERN

PRES

04/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date