# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 26, 2009**
**Secretary of State**

DOCUMENT# P05000115168

**Entity Name:** NEW GENERATION RESTORATION INC.

**Current Principal Place of Business:**

5702 GULFPORT BLVD. S.
STE 5
GULFPORT, FL 33707

**New Principal Place of Business:**

**Current Mailing Address:**

5702 GULFPORT BLVD. S.
STE 5
GULFPORT, FL 33707

**New Mailing Address:**

**FEI Number: 20-3394194** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

PROCTOR, STEPHEN
5702 GULFPORT BLVD. S.
STE 5
GULFPORT, FL 33707 US

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

PROCTOR, STEPHEN T
5702 GULFPORT BLVD. S.
STE 5
GULFPORT, FL 33707 US

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: STEPHEN T. PROCTOR 02/26/2009
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: PROCTOR, STEPHEN
Address: 5702 GULFPORT BLVD. S., STE 5
City-St-Zip: GULFPORT, FL 33707

Title: V ( ) Delete
Name: DANIEL, SILAS E III
Address: 5702 GULFPORT BLVD. S., STE 5
City-St-Zip: GULFPORT, FL 33707

Title: ST ( ) Delete
Name: DANIEL, SHERRYL P
Address: 5702 GULFPORT BLVD. S., STE 5
City-St-Zip: GULFPORT, FL 33707

Title: ST ( ) Delete
Name: PROCTOR, MARIE
Address: 5702 GULFPORT BLVD. S., STE 5
City-St-Zip: GULFPORT, FL 33707

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: PROCTOR, STEPHEN T
Address: 5702 GULFPORT BLVD. S., STE 5
City-St-Zip: GULFPORT, FL 33707

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: MARIE PROCTOR ST 02/26/2009
Electronic Signature of Signing Officer or Director Date