

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000140635

**FILED**  
**Mar 10, 2010**  
**Secretary of State**

**Entity Name:** NEW PROVIDENCE LIMITED CORPORATION

**Current Principal Place of Business:**

8358 POINT MEADOWS DRIVE  
SUITE #11  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 231106  
GREAT NECK, NY 11023

**New Mailing Address:**

8358 POINT MEADOWS DRIVE  
SUITE #11  
JACKSONVILLE, FL 32256

**FEI Number:** 20-3638420

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCLEAN, RONALD K  
8358 POINT MEADOWS DRIVE  
SUITE #11  
JACKSONVILLE, FL 32256 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

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MCLEAN, RONALD K  
Address: 8358 POINT MEADOWS DRIVE SUITE #11  
City-St-Zip: JACKSONVILLE, FL 32256

Title: C  
Name: DEBLINGER, JAY L  
Address: 8358 POINT MEADOWS DRIVE SUITE #11  
City-St-Zip: JACKSONVILLE, FL 32256

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: JAY L. DEBLINGER

PRES

03/10/2010

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

\_\_\_\_\_ Date