

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000039708

FILED  
Mar 14, 2006  
Secretary of State

Entity Name: NEWPORT MARKETING, INC.

**Current Principal Place of Business:**

5133-53RD AVENUE EAST  
BRADENTON, FL 34203

**New Principal Place of Business:**

6620 CORTEZ ROAD WEST  
BRADENTON, FL 34210

**Current Mailing Address:**

5133-53RD AVENUE EAST  
BRADENTON, FL 34203

**New Mailing Address:**

6620 CORTEZ ROAD WEST  
BRADENTON, FL 34210

FEI Number: 59-3247723

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BARNES WALKER CHARTERED INC  
3119 MANATEE AVE W  
BRADENTON, FL 34205 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: DPS ( ) Delete  
Name: LIE-NIELSEN, DEBRA  
Address: 5133-53RD AVENUE EAST  
City-St-Zip: BRADENTON, FL 34203

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

Title: DPS (X) Change ( ) Addition  
Name: LIE-NIELSEN, DEBRA  
Address: 6620 CORTEZ ROAD WEST  
City-St-Zip: BRADENTON, FL 34210

I hereby certify that the information supplied with this filing does not qualify for the 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: KAREN T JOHNSON

CNTR

03/14/2006

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

\_\_\_\_\_ Date