## · FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P94000073140 (3)

NEWPORT, INC.

SARASOTA FL 34243

2. Principal Place of Business

Principal Place of Business	Mailing Address
7011 301 BLVD.	6035 ROLLINS STREET

2a. Mailing Address

6035 ROLLINS STREET BRADENTON FL 34207

## **FILED** Feb 09 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualified

10/05/1994 4. FEI Number

21		26				65-0525715	No	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75 Additional Fee Required		
City & Stat	e	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 Added t		
Zip	Country	Zip	Count	ry		8. This corporation owes or has paid th	ne current year Inta		
24	25	29	30			Personal Property Tax due June 30.		No	
	9. Name and Address of Currer	nt Registered Agent		41 57		10. Name and Address of New Regist	ered Agent		
	iristensen, gail d		۱۶	1 Name	3				
7011 301 BLVD. SARASOTA FL 34243			8	82 Street Address (P.O. Box Number is Not Acceptable)					
			Ļ	83					
			8	3				•	
			8	4 City			FL 85 Zip C	Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statut	es, the abo	ve-named	d corpor	ation submits this statement for the purpo		s registered	
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida, Such change was	authorized i	by the corp	rporation	's board of directors. I hereby accept the	appointment as	registered	
•	in familiar with, and accept the oblig	ations of, section 607.0505, Fi	orioa Statut	es.		•			
SIGNATURE	Stgnature, typed or printed name of registered age	ent and title if applicable. (NOT	E: Registered A	nent signature	re required	when reinstating)	ATE		
12,		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS		S IN 12	
TITLE	P	DELETE	1.1 1116		$\top$	<del></del>	☐ Change	Addition	
NAME	CHRISTENSEN, GAIL D		1.2 NAM	:				ľ	
STREET ADDRESS	6035 ROLLINS STREET		1.3 STRE	ET ADDRESS	.			ĺ	
CITY-ST-ZIP	BRADENTON FL 34207	4207		-ST-ZIP					
TITLE	D	☐ DELETE	2.1 TITUS				☐ Change	Addition	
NAME	CHRISTENSEN, ROGER		2.2 NAM					1	
STREET ADDRESS	6035 ROLLINS STREET		2.3 STRE	ET ADDRESS					
CITY-ST-ZIP	BRADENTON FL 34207	I DELEVANI EL ALGOT		-ST-ZIP				Ì	
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NAME			3.2 NAM	:	1			l	
STREET ADORESS		3.3 \$		ET ADDRESS					
CITY-ST-ZIP			3.4. CITY	-ST-ZIP	(			{	
TITLE		DELETE	4.1 TITLE				Change	Addition	
NAME			4. 2 NAM	ε					
STREET ADDRESS			4.3 STRE	ET ADDRESS	ļ			J	
CITY-ST-ZIP			4,4 CITY	ST-ZIP				\$	
TITLE		DELETE	5.1 TITLE		1		Change	Addition	
NAME			5.2 NAMI					1	
STREET ADDRESS			5.3 STRE	T ADDRESS	1			}	
CITY-ST-ZIP			5.4 CITY	ST-ZIP	1			,	
TITLE		DELETE	6,1 TITLE		1		Change	Addition	
NAME			6.2 NAMI	.					
STREET ADDRESS			6.3 STRE	et adoress	ì			ł	
CITY-ST-ZIP			6,4 CITY	·ST-ZIP	1			-	
14. I hereby o	certify that the information supplied w	rith this filing does not qualify for	or the exem	ption state	led in Se	ection 119.07(3)(i), Florida Statutes. I furth	er certify that the	information	

indicated on this athrular report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am ar 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: