## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P95000091855

1. Entity Name
NEW REGULATORY MARKETING SERVICES, INC.



FILED Jan 24, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

962 ALLEGRO LANE APOLLO BEACH, FL 33572

211 21

962 ALLEGRO LANE APOLLO BEACH, FL 33572

US



DO.	NUL	WKILE	IN THIS	SPACE

01082008 No Chg-P CR2E034 (11/05)

4. FEI Number Sp-3354467 Applied For Not Applied For Not Applied For Not Applicable

5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

WARD, ARTHUR J 962 ALLEGRO LANE APOLLO BEACH, FL 33572

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE  Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Financir     Trust Fund Contribution.		\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD WARD, ARTHUR J 962 ALLEGRO LANE APOLLO BEACH, FL 33572			·	•			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000793620 01/25/08-80016-017 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>1</sup>	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.								