2005 FOR PROFIT CORPORATION

FILED Jul 11, 2005 08:00 AM ANNUAL REPORT **Secretary of State** DOCUMENT # P99000043691 1. Entity Name NEWSOUTH BOOKS, INC. Mailing Address Principal Place of Business 10911 BONITA BEACH ROAD SE #2073 10981 BONITA BEACH ROAD BONITA SPRINGS, FL 34135 BONITA SPRINGS, FL 34135 07082005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FFI Number 59-3608338 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent HEDRICH, CLEDA P DO NOT WRITE 10981 BONITA BEACH ROAD BONITA SPRINGS, FL 34135 IN THIS SPACE 5. 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 reinsteting) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 in accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 OFFICERS AND DIRECTORS 10. PT TITLE 000000371967 07/11/05-80013-005 150.00 HEDRICH, CLEDA P NAME 10981 BONITA BEACH ROAD STREET ADDRESS CITY-ST-ZIP BONITA SPRINGS, FL 34135 VS ı, MLE HEDRICH, NORMAN S NAME 10981 BONITA BEACH ROAD STREET ADDRESS CITY-ST-ZIP BONITA SPRINGS, FL 34135 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 of 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 attachmer

SIGNATURE:

STREET ADDRESS CITY-ST-71P