

2000-UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S17903

1. Entity Name

A NEWTON INSURANCE CORPORATION

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90377 040 ***150.00

Principal Place of Business

Mailing Address

1000 PARK AVENUE
ORANGE PARK FL 32073
US

P.O. BOX 2460
ORANGE PARK FL 32067-2460

2. Principal Place of Business

3. Mailing Address

1177 PARK AVE

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 13

City & State

City & State

ORANGE PARK, FL

4. FEI Number

59-3039963

Applied For

Not Applicable

Zip

Country

Zip

Country

32073

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NEWTON, DONALD O.
1000 PARK AVENUE
ORANGE PARK FL 32073

Name
SAME

Street Address (P.O. Box Number is Not Acceptable)

1177 PARK AVE, SUITE 13.

City

ORANGE PARK

FL

Zip Code
32073

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
NEWTON, DONNA F
2358 STONEBRIDGE DRIVE
ORANGE PARK FL 32065

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
DIGGS, CHARLES W
8538 BITTERWOOD ST.
JACKSONVILLE FL 32244

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
DIGGS, REGINA S
8538 BITTERWOOD ST.
JACKSONVILLE FL 32244

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
NEWTON, DONALD O
2358 STONEBRIDGE DRIVE
ORANGE PARK FL 32065

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DONNA F. NEWTON

4/24/00

Date

904-264-0707

Daytime Phone #

CR2E034 (9/99)