

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000034246

**Entity Name:** MCP NEWBERRY, INC.

**Current Principal Place of Business:**

4240 S. RIDGEWOOD AVENUE  
UNIT 3  
PORT ORANGE, FL 32127

**Current Mailing Address:**

4240 S. RIDGEWOOD AVENUE  
UNIT 3  
PORT ORANGE, FL 32127 US

**FEI Number:** 84-2194768

**Certificate of Status Desired:** No

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

NEWBERRY, CHADWICK  
4240 S. RIDGEWOOD AVENUE  
UNIT 3  
PORT ORANGE, FL 32127 US

*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

**Officer/Director Detail :**

Title            P/T  
Name            NEWBERRY, CHADWICK  
Address        4240 S. RIDGEWOOD AVENUE  
City-State-Zip: PORT ORANGE FL 32127

Title            VP/S  
Name            TEMPLE, PATRICIA  
Address        4240 S. RIDGEWOOD AVENUE  
City-State-Zip: PORT ORANGE FL 32127

*I hereby 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 all other like empowered.*

**SIGNATURE:** CHADWICK NEWBERRY

**PRESIDENT**

**05/03/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date