

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000119

Entity Name: NPC OF AMERICA, INC.

FILED  
Apr 19, 2011  
Secretary of State

**Current Principal Place of Business:**

401 WILSHIRE BLVD  
SUITE 1100  
SANTA MONICA, CA 90401

**New Principal Place of Business:**

**Current Mailing Address:**

1 CORPORATE WAY  
ATTN: TAX DEPT S35  
LANSING, MI 48951

**New Mailing Address:**

FEI Number: 38-3023534

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: LIVINGSTON, JAMES  
Address: 7601 TECHNOLOGY WAY  
City-St-Zip: DENVER, CO 80237

Title: D/S  
Name: MEYER, THOMAS J  
Address: 1 CORPORATE WAY  
City-St-Zip: LANSING, MI 48951

Title: SVP  
Name: COLLINS, MAURA  
Address: 401 WILSHIRE BLVD, STE 1100  
City-St-Zip: SANTA MONICA, CA 90401

Title: SVP  
Name: GUNDERSON, GERRY  
Address: 212 N. 4TH ST.  
City-St-Zip: BISMARCK, ND 58501

Title: AVP  
Name: MANEVAL, TODD  
Address: 1 CORPORATE WAY  
City-St-Zip: LANSING, MI 48951

Title: D/P  
Name: NIEDERMEIER, LYNN  
Address: 401 WILSHIRE BLVD, STE 1100  
City-St-Zip: SANTA MONICA, CA 90401

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: THOMAS J. MEYER

S/D

04/19/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date