

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2008 JAN 25 AM 8:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G90790

1. Entity Name
NPI CAPITAL CORPORATION



Principal Place of Business

1010 RACQUET CLUB DR, STE 103
AUBURN, CA 95603 US

Mailing Address

1010 RACQUET CLUB DR, STE 103
AUBURN, CA 95603 US



03022007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2405701 Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

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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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CASPER, JOHN P
STREET ADDRESS	1010 RACQUET CLUB DR, STE 103
CITY-ST-ZIP	AUBURN, CA 95603
TITLE	S
NAME	CASPER, JOHN P
STREET ADDRESS	1010 RACQUET CLUB DR, STE 103
CITY-ST-ZIP	AUBURN, CA 95603
TITLE	T
NAME	CASPER, JOHN P
STREET ADDRESS	1010 RACQUET CLUB DR, STE 103
CITY-ST-ZIP	AUBURN, CA 95603
TITLE	D
NAME	CASPER, JOHN P
STREET ADDRESS	1010 RACQUET CLUB DR, STE 103
CITY-ST-ZIP	AUBURN, CA 95603
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

600118436816
02/20/08-01019-003 **150.00

DO NOT WRITE
IN THIS SPACE

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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

John P. Casper 10/17/07 4/30/07 530-823-5206