

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jan 17, 2005  
Secretary of State**

DOCUMENT# L01000020922

Entity Name: NBP, LLC

**Current Principal Place of Business:**

522 STOCKTON ST.  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

**Current Mailing Address:**

522 STOCKTON ST.  
JACKSONVILLE, FL 32204

**New Mailing Address:**

FEI Number: 22-3850961      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

COLD, KATHLEEN H  
ONE INDEPENDENT DR., STE. 2301  
JACKSONVILLE, FL 32202 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

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: PARYANI, NANDLAL(NANDU) B  
Address: 522 STOCKTON STREET  
City-St-Zip: JACKSONVILLE, FL 32204

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NANDLAL PARYANI      PRES      01/17/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date