

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000053253

FILED
Feb 27, 2012
Secretary of State

Entity Name: NP IX, INC.

Current Principal Place of Business:

5821 C LAKE WORTH ROAD
GREENACRES, FL 33463

New Principal Place of Business:

4280 PROFESSIONAL CENTER DRIVE
SUITE 100
PALM BEACH GARDENS, FL 33410 US

Current Mailing Address:

5821 C LAKE WORTH ROAD
GREENACRES, FL 33463

New Mailing Address:

4280 PROFESSIONAL CENTER DRIVE
SUITE 100
PALM BEACH GARDENS, FL 33410 US

FEI Number: 20-2365926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIDEL, PETER S ESQ.
5819 LAKE WORTH ROAD
GREENACRES, FL 33463 US

Name and Address of New Registered Agent:

SIDEL, PETER S ESQ.
4280 PROFESSIONAL CENTER DRIVE
SUITE 110
PALM BEACH GARDENS, FL 33410 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: PETER S. SIDEL, ESQUIRE

02/27/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: HART, JOEL B
Address: 4280 PROFESSIONAL CENTER DRIVE, SUITE 100
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: SD
Name: HART, NANCY C
Address: 4280 PROFESSIONAL CENTER DRIVE, SUITE 100
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: SVPD
Name: FORBERGER, PAUL
Address: 4280 PROFESSIONAL CENTER DRIVE, SUITE 100
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: VPAS
Name: AMBROSINO, TRACI L
Address: 4280 PROFESSIONAL CENTER DRIVE, SUITE 100
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: S
Name: RUSSO, SUSAN A
Address: 4280 PROFESSIONAL CENTER DRIVE, SUITE 100
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

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: TRACI L. AMBROSINO

VP

02/27/2012

Electronic Signature of Signing Officer or Director

Date