

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F01000001225

FILED
Nov 14, 2006
Secretary of State**Entity Name:** AREVA NP INC.**Current Principal Place of Business:**3315 OLD FOREST ROAD
OF 28
LYNCHBURG, VA 24501**New Principal Place of Business:****Current Mailing Address:**3315 OLD FOREST ROAD
LEGAL - OF 28
LYNCHBURG, VA 24501**New Mailing Address:****FEI Number:** 54-1536465**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 323012525 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:** PCEO () Delete
Name: CHRISTOPHER, THOMAS A
Address: 3315 OLD FOREST ROAD
City-St-Zip: LYNCHBURG, VA 245010935**Title:** SVP () Delete
Name: BEAM, GEORGE B
Address: 3315 OLD FOREST ROAD
City-St-Zip: LYNCHBURG, VA 245010935**Title:** SEC () Delete
Name: GUZA, DAVID F
Address: 3315 OLD FOREST ROAD
City-St-Zip: LYNCHBURG, VA 245010935**Title:** VP () Delete
Name: GANTHNER, RAYMOND W
Address: 3315 OLD FOREST ROAD
City-St-Zip: LYNCHBURG, VA 245010935**Title:** VP () Delete
Name: BLICKENSTAFF, STEPHEN M
Address: 3315 OLD FOREST ROAD
City-St-Zip: LYNCHBURG, VA 245010935**Title:** SVP () Delete
Name: MATHESON, JOHN E
Address: 3315 OLD FOREST ROAD
City-St-Zip: LYNCHBURG, VA 245010935**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** SVP (X) Change () Addition
Name: MATHESON, JOHN E
Address: 3315 OLD FOREST ROAD
City-St-Zip: LYNCHBURG, VA 245010935**Title:** POE (X) Change () Addition
Name: FOX, WILLIAM A III
Address: 7207 IBM DRIVE
City-St-Zip: CHARLOTTE, NC 28262

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAVID F. GUZA

SEC

11/14/2006

Electronic Signature of Signing Officer or Director_____
Date