

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005138

FILED
Feb 20, 2007
Secretary of State

Entity Name: NOUVEON TECHNOLOGY PARTNERS, INC.

Current Principal Place of Business:

6100 FAIRVIEW RD
SUITE 560
CHARLOTTE, NC 28210

New Principal Place of Business:

Current Mailing Address:

6100 FAIRVIEW RD
SUITE 560
CHARLOTTE, NC 28210

New Mailing Address:

FEI Number: 13-4238117 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENLEY, DAVID
4720 SALISBURY RD
STE 242
JACKSONVILLE, FL 32256 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: EBERLE, T J JR.
Address: 6100 FAIRVIEW RD, STE 560
City-St-Zip: CHARLOTTE, NC 28210

Title: S () Delete
Name: EBERLE, MELISSA R
Address: 6100 FAIRVIEW RD, STE 560
City-St-Zip: CHARLOTTE, NC 28210

Title: T () Delete
Name: HOBENSACK, JEFFREY J
Address: 6100 FAIRVIEW RD, STE 560
City-St-Zip: CHARLOTTE, NC 28210

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: ONISICK, WILLIAM
Address: 6100 FAIRVIEW ROAD, STE 560
City-St-Zip: CHARLOTTE, NC 28210

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: JEFFREY J. HOBENSACK

T

02/20/2007

Electronic Signature of Signing Officer or Director

_____ Date