


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # H93205 1. Entity Name NIPPER PAVING COMPANY INC.	
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Principal Place of Business 3810 AUTUMN PALM DR. ZEPHYRHILLS, FL 33541-4106	Mailing Address 3810 AUTUMN PALM DR. ZEPHYRHILLS, FL 33541-4106
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DO NOT WRITE IN THIS SPACE



01252006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2622816	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent NIPPER, J E 3810 AUTUMN PALM DR. ZEPHYRHILLS, FL 34248

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	1100000405262 02/07/06-80035-001 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD NIPPER, AMARYLLIS 3810 AUTUMN PALM DR. ZEPHYRHILLS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD NIPPER, ANGELA D 3810 AUTUMN PALM DR. ZEPHYRHILLS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD NIPPER, JAMES E 3810 AUTUMN PALM DR ZEPHYRHILLS, FL 33541
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WOOD, DONNA R 3810 AUTUMN PALM DR. ZEPHYRHILLS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D OLSON, ALICE G 2514 W. KIRBY ST. TAMPA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *James E. Nipper*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____