

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000000883

**FILED**  
**Feb 19, 2007**  
**Secretary of State**

**Entity Name:** NAP LLC

**Current Principal Place of Business:**

200 DEVAULT STREET  
UMATILLA, FL 32784

**New Principal Place of Business:**

**Current Mailing Address:**

200 DEVAULT STREET  
UMATILLA, FL 32784

**New Mailing Address:**

**FEI Number:** 27-0001533

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PLANT, JOYCE  
1123 LAKE SHORE BLVD  
TAVARES, FL 32778 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/MANAGERS:**

Title: O ( ) Delete  
Name: HAMAD, NEAL  
Address: 200 DEVAULT ST  
City-St-Zip: UMATILLA, FL 32784

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: HAMAD, NEAL  
Address: 200 DEVAULT ST  
City-St-Zip: UMATILLA, FL 32784

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 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:** NEAL M. HAMAD

MGRM

02/19/2007

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