

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 16, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000025176

1. Entity Name
NPC LAND COMPANY, LLC



Principal Place of Business

1400 30TH ST
2ND FLOOR SUITE B
NICEVILLE, FL 32578

Mailing Address

1400 30TH ST
2ND FLOOR SUITE B
NICEVILLE, FL 32578



01102007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 74-3098675	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, THERESA H.
1400 30TH ST
2ND FLOOR SUITE B
NICEVILLE, FL 32578

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	JOHNSON, THERESA H.
STREET ADDRESS	1400 30TH ST 2ND FLOOR SUITE B
CITY- ST- ZIP	NICEVILLE, FL 32578
TITLE	MGR
NAME	JOHNSON, MARTY
STREET ADDRESS	1400 30TH ST 2ND FLOOR SUITE B
CITY- ST- ZIP	NICEVILLE, FL 32578
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U00000669150
03/27/07-80060-012 50.00

**DO NOT WRITE
IN THIS SPACE**

11. 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 is true and accurate and that my 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: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/2/2007 606-436-0736

Date

Daytime Phone #