

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036831

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** NEW POWER ORGANIZATION, LLC

**Current Principal Place of Business:**

3600 PORT JACKSONVILLE PARKWAY  
JACKSONVILLE, FL 32226

**New Principal Place of Business:**

10416 ALTA DRIVE  
JACKSONVILLE, FL 32226

**Current Mailing Address:**

3600 PORT JACKSONVILLE PARKWAY  
JACKSONVILLE, FL 32226

**New Mailing Address:**

10416 ALTA DRIVE  
JACKSONVILLE, FL 32226

FEI Number: 90-0113588

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANDERSON, LAURENCE  
3600 PORT JACKSONVILLE PARKWAY  
JACKSONVILLE, FL 32226 US

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

ANDERSON, LAURENCE  
10416 ALTA DRIVE  
JACKSONVILLE, FL 32226 US

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

01/19/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ANDERSON, LAURENCE MR.  
Address: 10416 ALTA DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

Title: MGRM  
Name: CAMPION, JOHN MR.  
Address: 10416 ALTA DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

I hereby 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: ROBERT UDELL

CFO

01/19/2012

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