# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L05000105635**

1. Entity Name
NBP HOLDING COMPANY, LLC

| Principal Place of Business | Mailing Address |
|---|---|
| 14208 CLARENDON DRIVE<br>TAMPA, FL 33624 | 14208 CLARENDON DRIVE<br>TAMPA, FL 33624 |

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03172007 No Chg-LLC          CR2E083 (11/05)

| 4. FEI Number | Applied For |
|---|---|
| 20-3705542 | Not Applicable |

5. Certificate of Status Desired ☐    **$5.00** Additional Fee Required

## 6. Name and Address of Current Registered Agent

HART, R EDWARD
14208 CLARENDON DRIVE
TAMPA, FL 33624

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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 _____

Signature, typed or printed name of registered agent and title if applicable.    (NOTE: Registered Agent signature required when reinstating)    DATE

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

9. MANAGING MEMBERS/MANAGERS

| TITLE | MGRMBR. |
|---|---|
| NAME | HART, EDWARD |
| STREET ADDRESS | 14208 CLARENDON DRIVE |
| CITY-ST-ZIP | TAMPA, FL 33624 |

| TITLE |  |
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| NAME |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP |  |

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| CITY-ST-ZIP |  |

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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: _Edward Hart_          _3/17/07_

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