

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122441

Entity Name: NTP ENTERPRISES, LLC

FILED  
Feb 26, 2009  
Secretary of State

**Current Principal Place of Business:**

13889 WELLINGTON TRACE  
A-21  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

**Current Mailing Address:**

44 CLIPPER POINT ROAD  
MYSTIC, CT 063553650 US

**New Mailing Address:**

FEI Number: 54-2190791

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FOGLE, SARAH D  
15 RAINTREE LANE  
ORMOND BEACH, FL 32174 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: MRS ( ) Delete  
Name: PARKER, NANCY E MGRM  
Address: 8 LOST SPRING WAY  
City-St-Zip: ORMOND BEACH, FL 32174 US

**ADDITIONS/CHANGES:**

Title: MRS (X) Change ( ) Addition  
Name: PARKER, NANCY E MGRM  
Address: 44 CLIPPER POINT ROAD  
City-St-Zip: MYSTIC, CT 06355 US

I hereby certify that the information supplied with this filing does not qualify 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: NANCY E. PARKER

MGRM

02/26/2009

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