

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002463

FILED
Mar 14, 2006
Secretary of State

Entity Name: NEW PROVIDENCE DEVELOPMENT CENTER, INC.

Current Principal Place of Business:

760 NW 53 ST
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

760 NW 53 ST
MIAMI, FL 33127

New Mailing Address:

FEI Number: 20-0954676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAVIS, VINSON
760 NW 53 ST
MIAMI, FL 33127 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DAVIS, VINSON
Address: 760 NW 53 ST
City-St-Zip: MIAMI, FL 33127

Title: D () Delete
Name: SWEET, ERIC
Address: 760 NW 53 ST
City-St-Zip: MIAMI, FL 33127

Title: D () Delete
Name: NELSON, PATRICK
Address: 760 NW 53 ST
City-St-Zip: MIAMI, FL 33127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VINSON DAVIS

D

03/14/2006

Electronic Signature of Signing Officer or Director

Date