


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90092 037 ***150.00

DOCUMENT # P00000017924			
1. Entity Name NCP INVESTMENTS, INC.			
Principal Place of Business 4203 BAMBOO TERRACE BRADENTON, FL 34210 US		Mailing Address 4203 BAMBOO TERRACE BRADENTON, FL 34210 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address P.O. BOX 14544	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State BRADENTON, FL	
Zip	Country	Zip 34280-4544	Country
6. Name and Address of Current Registered Agent BLALOCK, LANDERS, WALTERS & VOGLER, P.A. 802 11TH STREET WEST BRADENTON, FL 34205		7. Name and Address of New Registered Agent Name: NANCY PALOMINO Street Address (P.O. Box Number is Not Acceptable): 4203 BAMBOO TER. BRADENTON 34210 City: FL Zip Code	
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: <u>Nancy Palomino</u> NANCY PALOMINO 4-27-07 Signature, typed or printed name of registered agent and title if applicable. (NOX Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PALOMINO, CELESTINO 4203 BAMBOO TERRACE BRADENTON, FL 34210 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PALOMINO, NANCY 4203 BAMBOO TERRACE BRADENTON, FL 34210 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Nancy Palomino</u> NANCY PALOMINO 4-27-07 (941) 795-1357 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

40100700



04302007 Chg-P CR2E034 (12/06)

4. FEI Number 65-1114502 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required