

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90421 016 ***150.00

DOCUMENT # P03000049471

1. Entity Name
NP VI, INC.



Principal Place of Business
5821 LAKE WORTH ROAD
GREENACRES, FL 33463

Mailing Address
5821 LAKE WORTH ROAD
GREENACRES, FL 33463

40089661



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01172007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

54-2112008

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HART, MATTHEW C
5821 LAKE WORTH ROAD
GREENACRES, FL 33463

7. Name and Address of New Registered Agent

Name **PETER S. SIDEL**

Street Address (P.O. Box Number is Not Acceptable)

5821 LAKE WORTH ROAD

City **GREENACRES**

FL

Zip Code **33463**

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME HART, JOEL B
STREET ADDRESS 5821 LAKE WORTH ROAD
CITY-ST-ZIP GREENACRES, FL 33463

TITLE VD ☐ Delete
NAME FORBERGER, PAUL
STREET ADDRESS 5821 LAKE WORTH ROAD
CITY-ST-ZIP GREENACRES, FL 33463

TITLE D ☐ Delete
NAME SIDEL, PETER S
STREET ADDRESS 5821 LAKE WORTH ROAD
CITY-ST-ZIP GREENACRES, FL 33463

TITLE TVD ☒ Delete
NAME HART, MATTHEW C
STREET ADDRESS 5821 LAKE WORTH ROAD
CITY-ST-ZIP GREENACRES, FL 33463

TITLE SD ☐ Delete
NAME HART, NANCY C
STREET ADDRESS 5821 LAKE WORTH ROAD
CITY-ST-ZIP GREENACRES, FL 33463

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Senior Vice President ☒ Change ☐ Addition
NAME Forberger, Paul
STREET ADDRESS 5821 Lake Worth Road
CITY-ST-ZIP Greenacres, FL 33463

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Vice President ☐ Change ☒ Addition
NAME Matthew P. Adams
STREET ADDRESS 5821 Lake Worth Road
CITY-ST-ZIP Greenacres, FL 33463

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Peters S. Sidel

04/24/07

Date

Daytime Phone #

561-966-0070