2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000043202

City-St-Zip: GREEN ACRES, FL 33403

Entity Name: NP VII, INC.

FILED Mar 26, 2009 Secretary of State

Current F	Principal Plac	e of Business:	New Principal Place of Business:		
5819 LAK	LE MANAGEM E WORTH RC CRES, FL 334	1			
Current N	Mailing Addre	ss:	New Mailing Address:		
5819 LAK	LE MANAGEM E WORTH RD CRES, FL 334	l			
FEI Number	r: 20-0826543	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
5819 LAK	ETER S LE MANAGEM E WORTH RD CRES, FL 334				
	e named entity te of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	IRE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	ımpaign Financir	ng Trust Fund Contribution ().			
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	HART, JOEL E 5821-C LAKE	WORTH RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HART, JOEL E 5821-C LAKE	WORTH RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ADAMS, MAT 5821-C LAKE	WORTH RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SVP FORBERGEF 5821-C LAKE		Title: Name: Address:	() Change () Addition	

2008 A/R incorrectly updated. Document altered in order to be in compliance. MEM 05/28/09

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

	SIGNATURE: F	PAUL FORBERGER	SVP	03/26/2009
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