

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2008 8:00 am**  
**Secretary of State**

04-14-2008 90028 003 \*\*\*150.00

**40066974**



01102008 Chg-P CR2E034 (12/06)

<b>DOCUMENT # P04000053253</b> 1. Entity Name NP IX, INC.					
Principal Place of Business C/O NOBLE MANAGEMENT CO. 5819 LAKE WORTH RD GREENACRES, FL 33463			Mailing Address C/O NOBLE MANAGEMENT CO. 5819 LAKE WORTH RD GREENACRES, FL 33463		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-2365926	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  SIDEL, PETER S C/O NOBLE MANAGEMENT CO. 5819 LAKE WORTH RD GREENACRES, FL 33463				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HART, JOEL B 5821-C LAKE WORTH RD GREENACRES, FL 33463	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HART, JOEL B 5821-C LAKE WORTH RD GREEN ACRES, FL 33463	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FORBURGER, PAUL 5821-C LAKE WORTH RD GREENACRES, FL 33463	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ADAMS, MATTHEW P 5821 - C LAKE WORTH RD GREENACRES, FL 33463	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hart, Joel B 5821-C Lake Worth Rd. Greenacres, FL 33463	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP-Senior Vice President Forberger, Paul 5821-C Lake Worth Rd. Greenacres, FL 33463	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP-Senior Vice President Forberger, Paul 5821-C Lake Worth Rd. Greenacres, FL 33463	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP-Senior Vice President Forberger, Paul 5821-C Lake Worth Rd. Greenacres, FL 33463	<input checked="" 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.					
<b>SIGNATURE:</b> <i>Paul Forberger</i> <b>Paul Forberger, Senior VP 02/01/08 561-966-0070</b>					