

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056263

FILED
Apr 24, 2007
Secretary of State

Entity Name: NATURE POWER INTERNATIONAL, INC.

Current Principal Place of Business:

611 DRUID ROAD EAST
SUITE 403
CLEARWATER, FL 33756 US

New Principal Place of Business:

Current Mailing Address:

611 DRUID ROAD EAST
SUITE 403
CLEARWATER, FL 33756 US

New Mailing Address:

FEI Number: 20-2688422 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LETTAU, KATHLEEN
611 DRUID ROAD EAST
SUITE 403
CLEARWATER, FL 33756 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, S () Delete
Name: BSCHORR, HILDE
Address: 218 NORTH JEFFERSON
City-St-Zip: CLEARWATER, FL 33755 US

Title: D,VP () Delete
Name: FORBERGER, TORSTEN
Address: 31 FRESH FIELD BANKS, FOREST ROW
City-St-Zip: EAST SUSSEX, UK RH18 5HQ UK

Title: D,VP () Delete
Name: SCHALLER, GERD
Address: 611 DRUID ROAD EAST, SUITE 403
City-St-Zip: CLEARWATER, FL 33756 US

Title: D,T () Delete
Name: LAHMANN, WOLF D
Address: 611 DRUID ROAD EAST, SUITE 403
City-St-Zip: CLEARWATER, FL 33756 US

Title: T () Delete
Name: LETTAU, KATHLEEN
Address: 611 DRUID ROAD EAST, SUITE 403
City-St-Zip: CLEARWATER, FL 33756 US

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:

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 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.

SIGNATURE: KATHLEEN LETTAU

T

04/24/2007

Electronic Signature of Signing Officer or Director

Date