2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000055906

Entity Name: NVB CORPORATION

Address:

City-St-Zip:

2214 MERRITT PARK DRIVE

ORLANDO, FL 32803

FILED Jan 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 300 SOUTH ORANGE AVENUE 201 S. ORANGE AVE. SUITE #1000 SUITE #1000 ORLANDO, FL 32801 ORLANDO, FL 32801 New Mailing Address: **Current Mailing Address:** 300 SOUTH ORANGE AVENUE 201 S. ORANGE AVE. SUITE #1000 SUITE #1000 ORLANDO, FL 32801 ORLANDO, FL 32801 FEI Number: 20-4726660 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WOLLNER, RICHARD A 2917 WEST SR 434 **SUITE #151** LONGWOOD, FL 32779 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition NUNZIATA, SAL. A Name: Name: 176 VISTA OAK DRIVE Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: Title: () Delete () Change () Addition Name: NUNZIATA, ROBERT Name: 760 WILKINSON STREET Address: Address: ORLANDO, FL 32803 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition VARITEK, JARED Name: Name: 772 EAST MICHIGAN UNIT #71 Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: Title: () Delete Title: () Change () Addition BALLARD, LEE Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: SAL A NUNZIATA O 01/09/2007