## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000009733

NP CONSTRUCTION CO.

## **FILED** Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90072 036 \*\*\*150.00



Principal Place of Business Mailing Address					Transfer to the second and the secon	,	
1375 KASS CIRCLE SPRING HILL FL 34606		1375 KASS CIRCLE SPRING HILL FL 34606			DO NOT WRITE IN THI	S SPACE	
US US					3. Date Incorporated or Qualifed		
					02/01/1993		•
2 Principal P	aco of Rusiness	2a. Mailing Address			4. FEI Number		Applied For
2. Principal Place of Business		26			59-3167146	<u> </u>	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc					Additional
22	#, 010.	27	•		5. Certifcate of Status Desired	,	Required
City & State		City & State			6. Election Campaign Financing	\$5:0	O May Be
23		28	28		Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current year I	ntangible	
24	25	29	30		Personal Property Tax.	Yes	No
	9. Name and Address of Curr	rent Registered Agent			10. Name and Address of New Registere	d Agent	
200	0011 1101101 10			81 Name			
	SCIA, NICHOLAS			82 Street Addr	ress (P.O. Box Number is Not Acceptable)		
	KASS CIRCLE						
SPRI	NG HILL FL 34606			83			J
				84 City		85 Zij	p Code
				""	Foration submits this statement for the purpose of	L   [	
agent. I a	egistered agent, or both, in the Sta m familiar with, and accept the obli Signature, typed or printed name of registered a	igations of, Section 607.0505	o, Florida Stat	o by the corporation utes.	on's board of directors, I hereby accept the app		
12.		AND DIRECTORS	13.	Agent signature require	ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12
TITLE	DPST	☐ DELE1		TLE		☐ Chang	
NAME	PROSCIA, NICHOLAS		12 N	AME			
STREET ADDRESS	1375 KASS CIRCLE		1.3 ST	REET ADDRESS			4
CITY-ST-ZIP	SPRING HILL FL		1.4 CI	TY-ST-ZIP			
TITLE	DVP	☐ DELET				Change	e
NAME	PROSCIA, KATHLEEN		2.2 N	AME			
STREET ADDRESS	1375 KASS CIRCLE		2.3 \$	TREET ADDRESS			)
CITY-ST-ZIP	SPRING HILL FL		2.40	ITY-ST-ZIP			
TITLE		☐ DELET	TE 3.1 TI	TLE		Chang	e
NAME			3.2 N	AME			Ì
STREET ADDRESS			3.3 S	TREET ADDRESS			
CITY-ST-ZIP			3.4. C	ITY-ST-ZIP			
TITLE		☐ DELET	TE 4.1 TI	TLE	<del></del>	Chang	e 🗌 Addition
NAME			4, 2 N	AME			
STREET ADDRESS			4.3 S	TREET ADDRESS	•		ŀ
CITY-ST-ZIP			4.4 C	ITY-\$T-ZIP		_ <del>_</del>	
TITLE		DELE1	TE 5.1 TI	TLE		Chang	e 🗌 Addition
NAME			5.2 N	AME	•		
STREET ADDRESS			5.3 S	TREET ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP		<u></u>	
TITLE		☐ DELET				☐ Chang	e Addition
NAME			6.2 N	AME			ł
STREET ADDRESS			6.3 S	TREET ADDRESS			
CITY-ST-ZIP			6.4 C	TY-87-21P			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

- President