

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000095256

FILED  
Apr 06, 2007  
Secretary of State

Entity Name: NEW UNIVERSITY PYRAMID VILLAGE CORP.

## Current Principal Place of Business:

12734 KENWOOD LANE #89  
FORT MYERS, FL 33907

## New Principal Place of Business:

12734 KENWOOD LANE STE 89  
FORT MYERS, FL 33907

## Current Mailing Address:

12734 KENWOOD LANE #89  
FORT MYERS, FL 33907

## New Mailing Address:

12734 KENWOOD LANE STE 89  
FORT MYERS, FL 33907

FEI Number: 65-0713023

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ECKERTY, THOMAS G  
12734 KENWOOD LANE  
SUITE 89  
FORT MYERS, FL 33907 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: T ( ) Delete  
Name: FRELLER, WALTER  
Address: 12734 KENWOOD LANE STE 89  
City-St-Zip: FORT MYERS, FL

Title: P ( ) Delete  
Name: HONTZSCH, GERTRUDE  
Address: 12734 KENWOOD LANE STE 89  
City-St-Zip: FORT MYERS, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: FRELLER, WALTER  
Address: 12734 KENWOOD LANE STE 89  
City-St-Zip: FORT MYERS, FL 33907

Title: P (X) Change ( ) Addition  
Name: HONTZSCH, GERTRAUD  
Address: 12734 KENWOOD LANE STE 89  
City-St-Zip: FORT MYERS, FL 33907

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.

SIGNATURE: THOMAS G ECKERTY

RA

04/06/2007

Electronic Signature of Signing Officer or Director

Date