## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P99000102987

1. Entity Name

N.P. CONSTRUCTION OF NORTH FLORIDA, INC.



FILED Jan 17, 2006 08:00 AM Secretary of State

Principal Place of Business

6510 COLUMBIA PARK DRIVE

UNIT 206

JACKSONVILLE, FL 32258

Mailing Address

2488 RIDGE WILL DRIVE JACKSONVILLE, FL 32246



01112006

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3611086 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

PERAZA, NELSON E 2488 RIDGE WILL DRIVE JACKSONVILLE, FL 32246

## DO NOT WRITE IN THIS SPACE

JACKSONVILLE, FL 32246		IN THIS SPACE		
The above named entity submits this statement for the parties obligations of registered agent.	purpose of changing its registered office of	r registered agent, or bo	oth, in the State of Florida. I am familiar with, and acce	
SIGNATURE Spinature, typed or printed name of registered agent and title 8 applicable. (NOTE: Registered.		gent signature required when reinstating)  DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	#99999389755 01/20/06-80057-011 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	CTORS		NOT WRITE THIS SPACE	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	*			

12. I hereby certify that the information supplied with this viling 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 of 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

\_ /Nelson E. Peraza

1-12-2006

904-545-50

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #