

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036831

Entity Name: NEW POWER ORGANIZATION, LLC

Current Principal Place of Business:

10416 ALTA DRIVE
JACKSONVILLE, FL 32226

Current Mailing Address:

2823 ST JOHNS BLUFF ROAD SOUTH
JACKSONVILLE, FL 32246 US

FEI Number: 90-0113588

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDERSON, LAURENCE
10416 ALTA DRIVE
JACKSONVILLE, FL 32226 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

Authorized Person(s) Detail :

Title MGRM
Name ANDERSON, LAURENCE MR.
Address 10416 ALTA DRIVE
City-State-Zip: JACKSONVILLE FL 32226

Title MGRM
Name CAMPION, JOHN MR.
Address 10416 ALTA DRIVE
City-State-Zip: JACKSONVILLE FL 32226

Title CFO
Name UDELL, ROBERT
Address 2823 ST JOHNS BLUFF ROAD SOUTH
City-State-Zip: JACKSONVILLE FL 32246

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT UDELL

CFO

04/25/2017

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date