


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 05, 2007 8:00 am**  
**Secretary of State**

03-05-2007 90043 015 \*\*\*150.00

<b>DOCUMENT # 843999</b>							
1. Entity Name <b>RESERVE NATIONAL INSURANCE COMPANY</b>							
Principal Place of Business <b>6100 NW GRAND BLVD OKLAHOMA CITY, OK 73118</b>			Mailing Address <b>6100 NW GRAND BLVD OKLAHOMA CITY, OK 73118</b>				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State		4. FEI Number <b>73-0661453</b>			
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
<b>CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000</b>			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			City			<b>FL</b>	Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>							
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	COLE, ROGER		NAME				
STREET ADDRESS	433 E. SORGHUM MILL ROAD		STREET ADDRESS				
CITY-ST-ZIP	EDMOND, OK 73013		CITY-ST-ZIP				
TITLE	P	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	COLE, JOE		NAME				
STREET ADDRESS	2709 S. AIR DEPOT		STREET ADDRESS				
CITY-ST-ZIP	EDMOND, OK 73013		CITY-ST-ZIP				
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	VIE, RICHARD		NAME				
STREET ADDRESS	ONE EAST WACKER DRIVE		STREET ADDRESS				
CITY-ST-ZIP	CHICAGO, IL 60601		CITY-ST-ZIP				
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SCHALLHORN, ANDREW		NAME				
STREET ADDRESS	9300 ALLISON LANE		STREET ADDRESS				
CITY-ST-ZIP	OKLAHOMA CITY, OK 73152		CITY-ST-ZIP				
TITLE	VT	<input type="checkbox"/> Delete	TITLE	VT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HIGGS, GARY E		NAME	HIGGS, GARY E			
STREET ADDRESS	7309 NW 114TH ST.		STREET ADDRESS	12405 MAIDEN LANE			
CITY-ST-ZIP	OKLAHOMA CITY, OK		CITY-ST-ZIP	OKLAHOMA CITY, OK 73142			
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WOOD, CHARLES		NAME				
STREET ADDRESS	ONE EAST WACKER DRIVE		STREET ADDRESS				
CITY-ST-ZIP	CHICAGO, IL 60601		CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing 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 or 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 if changed, or on an attachment with an address, with all other like empowered.							
<b>SIGNATURE:</b> <u>Stacey Barton</u>		Stacey Barton Vice-Pres		2-26-07 405-8487931			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>			