2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003236

Entity Name: NATIONAL PLANNING HOLDINGS, INC.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
401 WILSH STE 1100 SANTA MO	IRE BLVD NICA, CA 90	0401				
Current Mailing Address:			New Maili	New Mailing Address:		
1 CORPOR ATTN: TAX LANSING, I	DEPT. S35					
FEI Number:	52-2081725	FEI Number Applied For ()	FEI Number Not App	plicable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	d Address of New Registered Agent:		
1200 SOUT	PRATION SY: TH PINE ISLA DN, FL 3332	ND ROAD				
The above in the State		submits this statement for the pur	pose of changing i	its registered office or registered agent, or both,		
SIGNATUR						
	Electro	nic Signature of Registered Agent		Date		
Election Cam	paign Financir	ng Trust Fund Contribution ().				
OFFICERS	AND DIREC	CTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	SVP (GUNDERSON, 212 N 4TH STI BISMARCK, N	REET	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	S (MEYER, THOM 1 CORPORAT LANSING, MI	E WAY	Title: Name: Address: City-St-Zip:	S/D (X) Change () Addition MEYER, THOMAS J 1 CORPORATE WAY LANSING, MI 48951		
Title: Name: Address: City-St-Zip:	VP/D (HOPPING, ANI 1 CORPORAT LANSING, MI	E WAY	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	P/D (LIVINGSTON, 7601 TECHNO DENVER, CO	LOGY WAY	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VP (MANEVAL, TO 1 CORPORAT LANSING, MI	E WAY	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D (JACK, CLIFFO 7601 TECHNO DENVER, C0	LOGY WAY	Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify 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 J. MEYER S 04/23/2009