2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 850485

Apr 16, 2009 Secretary of State

Entity Name: NATIONAL HEALTH INSURANCE COMPANY

Current Principal Place of Business: New Principal Place of Business:

1901 N STATE HWY 360 GRAND PRAIRIE, TX 75050 US

Current Mailing Address: New Mailing Address:

P. O. BOX 619999 DALLAS, TX 752619999 US

FEI Number: 74-1541799 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 323990000 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FILED

Title: () Delete Title: (X) Change () Addition GREEN, EVA ANN GREEN, EVA ANN Name: Name: 828 HUNTERS GLEN TER 828 HUNTERS GLEN TER Address: Address:

City-St-Zip: FORT WORTH, TX 76120 City-St-Zip: FORT WORTH, TX 76120

VD Title: Title: () Delete (X) Change () Addition

Name: HILLIARD, RICHARD A Name: HILLIARD, RICHARD A 7913 CHADINGTON DR 7913 CHADINGTON DR Address: Address:

NORTH RICHLAND HILLS, TX 76180 NORTH RICHLAND HILLS, TX 76180 City-St-Zip: City-St-Zip:

() Delete Title: PD Title: () Change () Addition

HARRIS, CHARLES W Name: Name: 3293 BIRCH AVE Address: Address: City-St-Zip: GRAPEVINE, TX 76051 City-St-Zip:

Title: VSD () Delete Title: ٧S (X) Change () Addition

BROWN, RICHARD A BROWN, RICHARD A Name: Name: Address: 1710 SYLVAN DR. Address: 1710 SYLVAN DR. City-St-Zip: ARLINGTON, TX 76012 City-St-Zip: ARLINGTON, TX 76012

Title: CFO Title: (X) Change () Addition () Delete

MCKNIGHT, LORENE A Name: WAY, LYNDON B Name: 8308 BEVERLY DR Address: 1901 N ST HWY 360 Address: NORTH RICHLAND HILLS, TX 76180 GRAND PRAIRIE, TX 75050 City-St-Zip: City-St-Zip:

Title: Title:

() Delete (X) Change () Addition MAY, WILLIAM K Name: Name: KEMP, RHONDA N 2582 MISTY RIVER LN Address: Address: 1901 N ST HWY 360 City-St-Zip: DE PERE. WI 54115 City-St-Zip: GRAND PRAIRIE, TX 75050

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: CHARLES W HARRIS **PRES** 04/16/2009