2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002959

Entity Name: NATIONAL SPECIALTY UNDERWRITERS, INC.

FILED Jan 08, 2008 Secretary of State

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

10900 NE 4TH ST STE 1100 10900 NE 4TH ST STE 1100 BELLEVUE, WA 980045886 US

Current Mailing Address: New Mailing Address:

10900 NE 4TH ST STE 1100
BELLEVUE, WA 98004

10900 NE 4TH ST STE 1100
BELLEVUE, WA 980045886 US

FEI Number: 91-1676725 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:

EGAN, THOMAS

2385 EXECUTIVE CENTER RD, STE 100

BOCA RATON, FL 33431 US

CARR, CHERYL L SALES

2255 GLADES ROAD STE 111E

BOCA RATON, FL 33431 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: CHERYL LEE CARR 01/08/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name:

Title: PD (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 RANDALL, CHRIS
 Name:
 RANDALL, CHRIS

 10900 NE 4TH ST STE 1100
 Address:
 10900 NE 4TH ST STE 1100

 Address:
 10900 NE 4TH ST STE 1100
 Address:
 10900 NE 4TH ST STE 1100

 City-St-Zip:
 BELLEVUE, WA 98004 US
 City-St-Zip:
 BELLEVUE, WA 980045886 US

Title: T () Delete Title: T (X) Change () Addition Name: HEROLD, KAREN K Name: HEROLD, KAREN K

 Address:
 10900 NE 4TH ST STE 1100
 Address:
 10900 NE 4TH ST STE 1100

 City-St-Zip:
 BELLEVUE, WA 98004
 City-St-Zip:
 BELLEVUE, WA 980045886

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

 Name:
 HEROLD, KAREN K
 Name:
 HEROLD, KAREN K

 Address:
 10900 NE 4TH ST STE 1100
 Address:
 10900 NE 4TH ST STE 1100

 City-St-Zip:
 BELLEVUE, WA 98004
 City-St-Zip:
 BELLEVUE, WA 980045886

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: CHRIS RANDALL PRES 01/08/2008