2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003685

Entity Name: NATIONAL INFORMATION SOLUTIONS COOPERATIVE, INC.

FILED Jan 11, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
ONE INNOVATION CIRCLE LAKE ST LOUIS, MO 63367						
Current Mailing Address:			New Mailing Address:			
PO BOX 728 MANDAN, ND 58554						
FEI Number: 43-1879364 FEI Number Applied For () FEI Num		nber Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent: Name and A				Address of New Registered Agen	t:	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:		
Title: Name: Address: City-St-Zip:	C () E MILLER, MICHAE 3201 NYGREN D MANDAND, ND	RIVE NW	Title: Name: Address: City-St-Zip:	C (X) Change () Addition HARRIS, JOE 3201 NYGREN DRIVE NW MANDAN, ND 58554		
Title: Name: Address: City-St-Zip:	VC () E FREUDE, PAUL 3201 NYGREN D MANDAN, ND 58		Title: Name: Address: City-St-Zip:	VC (X) Change () Addition MILLER, MICHAEL 3201 NYGREN DRIVE NW MANDAN, ND 58554		
Title: Name: Address: City-St-Zip:	CEO () DOSCH, VERNO 3201 NYGREN D MANDAN, ND 58	RIVE NW	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	S () E BROTHEN, RON 3201 NYGREN D MANDAND, ND	RIVE	Title: Name: Address: City-St-Zip:	S (X) Change () Addition KNEGENDORF, LARRY 3201 NYGREN DRIVE MANDAND, ND 58554		
Title: Name: Address: City-St-Zip:	T () E KNEGENDORF, I 3201 NYGREN D MANDAN, ND 58	RIVE NW	Title: Name: Address: City-St-Zip:	T (X) Change () Addition FREUDE, PAUL 3201 NYGREN DRIVE NW MANDAN, ND 58554		
Title: Name: Address: City-St-Zip:	CFO ()[PORTER, TRACY 3201 NYGREN D MANDAN, ND 58	RIVE NW	Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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: VERNON DOSCH CEO 01/11/2007