

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006913

FILED  
Jan 30, 2006  
Secretary of State

Entity Name: N.P. PREMIUM FINANCE COMPANY

## Current Principal Place of Business:

28819 FRANKLIN ROAD SUITE #300  
SOUTHFIELD, MI 480341656 US

## New Principal Place of Business:

28819 FRANKLIN ROAD  
SOUTHFIELD, MI 480341656 US

## Current Mailing Address:

PO BOX 2223  
SOUTHFIELD, MI 480372223

## New Mailing Address:

PO BOX 2223  
SOUTHFIELD, MI 480372223 US

FEI Number: 38-2742963

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SKINNER, GREGORY  
10199 SOUTHSIDE BLVD., SUITE 200  
JACKSONVILLE, FL 322560757 US

## Name and Address of New Registered Agent:

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:

Title: CDP ( ) Delete  
Name: PETCOFF, JAMES G  
Address: 5853 CLEARVIEW COURT  
City-St-Zip: TROY, MI 48098 US

Title: VD ( ) Delete  
Name: PETCOFF, B. MATTHEW  
Address: 842 HATHAWAY DRIVE  
City-St-Zip: AUBURN HILLS, MI 48326 US

Title: DT ( ) Delete  
Name: BERRY, JOHN H  
Address: 30510 GREEN ACRES  
City-St-Zip: FARMINGTON HILLS, MI 48334 US

Title: S ( ) Delete  
Name: WIKMAN, JUDITH A  
Address: 28819 FRANKLIN ROAD SUITE #300  
City-St-Zip: SOUTHFIELD, MI 480341656 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CDP (X) Change ( ) Addition  
Name: PETCOFF, JAMES G  
Address: 28819 FRANKLIN ROAD  
City-St-Zip: SOUTHFIELD, MI 480341656 US

Title: D (X) Change ( ) Addition  
Name: PETCOFF, B. MATTHEW  
Address: 842 HATHAWAY DRIVE  
City-St-Zip: AUBURN HILLS, MI 48326 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOHN H. BERRY

T

01/30/2006

Electronic Signature of Signing Officer or Director

Date