# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 23, 2007**
**Secretary of State**

DOCUMENT# F05000006218

**Entity Name:** NORTON INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

5 CORPORATE PARK
SUITE 170
IRVINE, CA 92606 US

**New Principal Place of Business:**

**Current Mailing Address:**

5 CORPORATE PARK
SUITE 170
IRVINE, CA 92606 US

**New Mailing Address:**

**FEI Number: 33-0235066** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: P ( ) Delete
Name: NORTON, RONALD JAMES
Address: 5 CORPORATE PARK SUITE 170
City-St-Zip: IRVINE, CA 92606 9

Title: D ( ) Delete
Name: NORTON, RONALD JAMES
Address: 5 CORPORATE PARK SUITE 170
City-St-Zip: IRVINE, CA 92606 9

Title: V ( ) Delete
Name: SCANLON, MICHAEL J
Address: 5 CORPORATE PARK SUITE 170
City-St-Zip: IRVINE, CA 92606 9

Title: S ( ) Delete
Name: NORTON, HOLLY
Address: 5 CORPORATE PARK SUITE 170
City-St-Zip: IRVINE, CA 92606 9

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: NORTON, RONALD J
Address: 5 CORPORATE PARK SUITE 170
City-St-Zip: IRVINE, CA 92606 9

Title: D (X) Change ( ) Addition
Name: NORTON, RONALD J
Address: 5 CORPORATE PARK SUITE 170
City-St-Zip: IRVINE, CA 92606 9

Title: V (X) Change ( ) Addition
Name: SCANLON, MICHAEL J
Address: 5 CORPORATE PARK SUITE 170
City-St-Zip: IRVINE, CA 92606 9

Title: S (X) Change ( ) Addition
Name: NORTON, HOLLY K
Address: 5 CORPORATE PARK SUITE 170
City-St-Zip: IRVINE, CA 92606 9

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: RONALD J NORTON P 01/23/2007

Electronic Signature of Signing Officer or Director — Date