

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004315

FILED  
Jul 23, 2007  
Secretary of State

Entity Name: 1ST NATIONAL FINANCIAL CORPORATION

**Current Principal Place of Business:**

1475 W BIG BEAVER RD SUITE 300  
TROY, MI 48084

**New Principal Place of Business:**

1475 W BIG BEAVER RD  
SUITW 300  
TROY, MI 48084

**Current Mailing Address:**

1475 W BIG BEAVER RD SUITE 300  
TROY, MI 48084

**New Mailing Address:**

1475 W BIG BEAVER RD  
SUITE 300  
TROY, MI 48084

FEI Number: 38-2611879

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: CHRISTENSON, JACK D  
Address: 1475 W BIG BEAVER RD SUITE 300  
City-St-Zip: TROY, MI 48084

Title: P ( ) Delete  
Name: WOONTON, RICHARD C  
Address: 1475 W BIG BEAVER RD SUITE 300  
City-St-Zip: TROY, MI 48084

Title: SCFO ( ) Delete  
Name: CAMPBELL, RICHARD L  
Address: 1475 W BIG BEAVER RD SUITE 300  
City-St-Zip: TROY, MI 48084

Title: V ( ) Delete  
Name: CAMPBELL, RICHARD L  
Address: 1475 W BIG BEAVER RD SUITE 300  
City-St-Zip: TROY, MI 48084

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

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

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

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 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: RICHARD L. CAMPBELL

SCFO

07/23/2007

Electronic Signature of Signing Officer or Director

Date