2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2007
Secretary of State

DOCUMENT# F94000003454

Entity Name: PMI ADMINISTRATION, INC.

Current Principal Place of Business:

1499 WINDHORST WAY, SUITE 100
GREENWOOD, IN 46143

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5527
SPARTANBURG, SC 29304

New Mailing Address:

FEI Number: 35-1924431 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: P ( ) Delete
Name: HENTSCHEL, GARY F
Address: 1499 WINDHORST WAY, SUITE 100
City-St-Zip: GREENWOOD, IN 46143

Title: CEO ( ) Delete
Name: PRICE, MICHAEL R
Address: 105 DIVERSCO DRIVE
City-St-Zip: SPARTANBURG, SC 29307

Title: CFO ( ) Delete
Name: THOMPSON, RHONDA
Address: 105 DIVERSCO DR
City-St-Zip: SPARTANBURG, SC 29307

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:

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: STEFFANY SMITH ACCT 05/09/2007

Electronic Signature of Signing Officer or Director Date