


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2007 8:00 am
Secretary of State

03-08-2007 90004 011 ***150.00

DOCUMENT # F96000003215 1. Entity Name FINANCIAL INSURANCE SERVICES, INC.	
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Principal Place of Business 7277 WORLD COMMUNICATIONS DRIVE OMAHA, NE 68122	Mailing Address 7277 WORLD COMMUNICATIONS DRIVE OMAHA, NE 68122 US
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40051900



2. Principal Place of Business - No P.O. Box # 7277 World Communications Drive Suite, Apt. #, etc.	3. Mailing Address 7277 World Communications Drive Suite, Apt. #, etc.
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02212007 Chg-P CR2E034 (12/06)

City & State Omaha, NE	4. FEI Number 47-0791671
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Applied For
Not Applicable

Zip 68122	Country USA	Zip 68122	Country USA
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	DT	<input type="checkbox"/> Delete		TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CAMENZIND, ROBERT			NAME	ROBERT CAMENZIND		
STREET ADDRESS	7277 WORLD COMMUNICATIONS DRIVE			STREET ADDRESS	7277 WORLD COMMUNICATIONS DRIVE		
CITY-ST-ZIP	OMAHA, NE 68122			CITY-ST-ZIP	OMAHA, NE 68122		
TITLE	DT	<input checked="" type="checkbox"/> Delete		TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	RENO, RONALD			NAME	CRAIG JANTZI		
STREET ADDRESS	7277 WORLD COMMUNICATIONS DR			STREET ADDRESS	3102 WEST END AVENUE, SUITE 1000		
CITY-ST-ZIP	OMAHA, NE 68122			CITY-ST-ZIP	NASHVILLE, TN 37203		
TITLE	VS	<input checked="" type="checkbox"/> Delete		TITLE	VS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BEAUFIT, TERESA A			NAME	TERRENCE LEVE		
STREET ADDRESS	7277 WORLD COMMUNICATION DRIVE			STREET ADDRESS	3102 WEST END AVENUE, SUITE 1000		
CITY-ST-ZIP	OMAHA, NE 68122			CITY-ST-ZIP	NASHVILLE, TN 37203		
TITLE	V	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	CLOYD, SHERYL A			NAME			
STREET ADDRESS	7277 WORLD COMMUNICATION DRIVE			STREET ADDRESS			
CITY-ST-ZIP	OMAHA, NE 68122			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  3-5-07 (402) 963-6810
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #