

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K91769

FILED
Apr 20, 2009
Secretary of State

Entity Name: NATIONAL SPECIALTY LINES, INC.

Current Principal Place of Business:

730 NW 107TH AVE
BOX 653039
MIAMI, FL 33102398 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 199023
DALLAS, TX 75219 US

New Mailing Address:

3333 LEE PKWY
SUITE 1200
DALLAS, TX 75219 US

FEI Number: 65-0125014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: ANDERSON, GLENN W
Address: 3333 LEE PKWY, STE 1200
City-St-Zip: DALLAS, TX 45219

Title: P () Delete
Name: JOHNSTON, MICHAEL S.
Address: 730 NW 107TH AVE STE 200
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: ANDERSON, GLENN W
Address: 3333 LEE PKWY, STE 1200
City-St-Zip: DALLAS, TX 75219

Title: S () Delete
Name: BUXTON, RICHARD M
Address: 3333 LEE PKWY, STE 1200
City-St-Zip: DALLAS, TX 75219

Title: T () Delete
Name: COOTS, DANIEL J
Address: 3333 LEE PKWY, STE 1200
City-St-Zip: DALLAS, TX 75219

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:

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: MARCIA BURKETT

VP

04/20/2009

Electronic Signature of Signing Officer or Director

Date