## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000032605

Entity Name: NSI INSURANCE GROUP, INC.

FILED Mar 09, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8181 NW 154TH ST, #230 MIAMI LAKES, FL 33016

Current Mailing Address: New Mailing Address:

8181 NW 154TH ST, #230 8181 NW 154TH ST, #230 MIAMI LAKES, FL 33016 MIAMI LAKES, FL 330165882

FEI Number: 65-1132268 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WOLFORD, DEBORAH A 1580 SAWGRASS CORPORATE PARKWAY, SUITE 130

SUNRISE, FL 333232860 US

SEIKALY, OSCAR F 8181 NW 154TH ST, #230 MIAMI LAKES, FL 330165882 US

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: OSCAR F SEIKALY 03/09/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition NENEZIAN, GEORGE J NENEZIAN, GEORGE J Name: Name: 8181 NW 154TH ST, SUITE 230 8181 NW 154TH ST, SUITE 230 Address: Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: MIAMI LAKES, FL 330165882

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

Name: SEIKALY, OSCAR F Name: SEIKALY, OSCAR F

 Address:
 8181 NW 154TH ST, SUITE 230
 Address:
 8181 NW 154TH ST, SUITE 230

 City-St-Zip:
 MIAMI LAKES, FL 33016
 City-St-Zip:
 MIAMI LAKES, FL 330165882

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: GEORGE J NENEZIAN PRES 03/09/2006