

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000145142

FILED
Jun 08, 2005
Secretary of State**Entity Name:** NATIONAL INVESTMENT PARTNERS, INC.**Current Principal Place of Business:**P.O. BOX 590
PALM CITY, FL 34991**New Principal Place of Business:**625 N. FLAGLER DRIVE
SUITE 605
WEST PALM BEACH, FL 33401**Current Mailing Address:**P.O. BOX 590
PALM CITY, FL 34991**New Mailing Address:**625 N. FLAGLER DRIVE
SUITE 605
WEST PALM BEACH, FL 33401**FEI Number:** 20-1772212**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ALEXANDER, GARY D
1151 SOUTHWEST 30TH STREET
SUITE E
PALM CITY, FL 34990 US**Name and Address of New Registered Agent:**PARKER, GERALD C
625 N. FLAGLER DRIVE
SUITE 605
WEST PALM BEACH, FL 33401 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: GERALD C. PARKER

06/08/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P/S () Delete
Name: ALEXANDER, GARY D
Address: P.O. BOX 590
City-St-Zip: PALM CITY, FL 34991**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P/S (X) Change () Addition
Name: PARKER, GERALD C
Address: 625 N. FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GERALD C. PARKER

P/S

06/08/2005

Electronic Signature of Signing Officer or Director

Date