

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000135608

**FILED**  
**Jul 24, 2007**  
**Secretary of State**

**Entity Name:** NATIONAL INSURANCE CONCEPTS INC.

**Current Principal Place of Business:**

14255 49TH ST N  
200  
CLEARWATER, FL 33762

**New Principal Place of Business:**

14255 49TH ST N  
SUITE 200  
CLEARWATER, FL 33762

**Current Mailing Address:**

14255 49TH ST N  
200  
CLEARWATER, FL 33762

**New Mailing Address:**

14255 49TH ST N  
SUITE 200  
CLEARWATER, FL 33762

**FEI Number:** 20-5756886

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAREY, MICHAEL R  
712 S. OREGON AVE,  
TAMPA, FL 33606 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

**OFFICERS AND DIRECTORS:**

Title: CEO ( ) Delete  
Name: COOPER, SHANE N  
Address: 14255 49TH ST N STE 200  
City-St-Zip: CLEARWATER, FL 33762

Title: P ( ) Delete  
Name: HENSLEY, MICHAEL C  
Address: 14255 49TH ST N STE 200  
City-St-Zip: CLEARWATER, FL 33762

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PST (X) Change ( ) Addition  
Name: COOPER, KRISTY S  
Address: 14255 49TH ST N STE 200  
City-St-Zip: CLEARWATER, FL 33762

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: SHANE N. COOPER

CEO

07/24/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date