

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005209

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** FRANCHISE PROPERTY SERVICES, INC.

**Current Principal Place of Business:**

8919 WEST 21ST STREET  
SUITE 200-272  
WICHITA, KS 67205

**New Principal Place of Business:**

**Current Mailing Address:**

8919 WEST 21ST STREET  
SUITE 200-272  
WICHITA, KS 67205

**New Mailing Address:**

**FEI Number:** 48-1240630      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

A1A REGISTERED AGENT INC.  
5647 110TH AVE. NORTH  
ROYAL PALM BEACH, FL 334110000 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:** CVCD  
**Name:** STOVER, STANLEY  
**Address:** 8918 W. 21ST N.  
**City-St-Zip:** WICHITA, KS 67205

**Title:** S  
**Name:** STOVER, BARBARA  
**Address:** 8918 W. 21ST N.  
**City-St-Zip:** WICHITA, KS 67205

I hereby 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 all other like empowered.

SIGNATURE: BARBARA STOVER

S

04/27/2011

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

\_\_\_\_\_ Date