2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

FILED Apr 01, 2005 08:00 AM Secretary of State **DOCUMENT # 825797** 1. Entity Name HALLMARK MARKETING CORPORATION Mailing Address Principal Place of Business ____ 2501 MC GEE MAIL DROP 407 ATTN: TAX DEPT. 407 BOX 419479 KANSAS CITY MO 64141 KANSAS CITY MO 64141 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State Applied For 4. FEI Number 43-0820871 Not Applicable Żip \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Delete TITLE ☐ Change Addition TITLE U00000283861 DON FLETCHER NAME NAME 04/01/05-80043-021 150.00 STREET ADDRESS 2128 OAK CREST DR STREET ADDRESS CITY-ST-ZIP LIBERTY MO 64068 CHY-ST-7IP HILL PD ☐ Delete TITLE ☐ Change ☐ Addition NAME PAOLETTI, STEVE STREET ADDRESS 12706 CEDAR STREET ADDRESS CITY-ST-ZIP LEAWOOD KS 66209 CITY, ST. 7P TITLE Change ☐ Addition TITLE ☐ Defete NAME STURGEON, ROD NAME STREET ADDRESS STREET ADORESS 16950 206TH STREET CITY-ST-ZIP CHY-ST-7P TONGANOXIE KS 66086 TITLE HILL Change ☐ Addition ☐ Delete KATZ, BERRY NAME NAME 11333 HEMLOCK STREET ADDRESS STREET ADDRESS **OVERLAND PARK KS 66210** CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition HARTLEY, KEVIN NAME MARAE 16 F STREET STREET ADDRESS STRFFT ADDRESS LAKE LOTAWANA MO 64086 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete DEF MCKINNEY, BRUCE NAME NAME 10423 WEST 126TH STREET STREET ADDRESS STREET ADDRESS OVERLAND PARK KS 66213 CITY-ST-ZIP CITY-ST-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental eport is true and accurate and that my 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 truetee empowered by execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on a attachment without address, with all when like empowered. changed, or on an attachment with er like empowered

DEFICER OR DIRECTOR

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIF

Kevin M. Hartley

316-545-6930