

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006910

Entity Name: THE AMERICAN AGENCY, INC.

FILED  
Mar 15, 2005  
Secretary of State

## Current Principal Place of Business:

10950 GRANDVIEW, SUITE 600  
OVERLAND PARK, KS 66210

## New Principal Place of Business:

## Current Mailing Address:

10950 GRANDVIEW, SUITE 600  
OVERLAND PARK, KS 66210

## New Mailing Address:

FEI Number: 48-0904362

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRUBBA, GERALD  
101 FEDERAL HIGHWAY, SUITE 101  
TARPOON SPRINGS, FL 34689 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LOWRY, SHAWN  
Address: 10950 GRANDVIEW, SUITE 600  
City-St-Zip: OVERLAND PARK, KS 66210

Title: SD ( ) Delete  
Name: DEVLIN, DANE  
Address: 10950 GRANDVIEW, SUITE 600  
City-St-Zip: OVERLAND PARK, KS 66210

Title: V ( ) Delete  
Name: MAXWELL, CHAD  
Address: 10950 GRANDVIEW, SUITE 600  
City-St-Zip: OVERLAND PARK, KS 66210

Title: V ( ) Delete  
Name: RATTERMAN, B W III  
Address: 301 S PERIMETER PARK DR, SUITE 100  
City-St-Zip: NASHVILLE, TN 37211

Title: VP ( ) Delete  
Name: DEVLIN, DANE  
Address: 10950 GRANDVIEW, SUITE 600  
City-St-Zip: OVERLAND PARK, KS 66210

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: SHAWN LOWRY

PD

03/15/2005

Electronic Signature of Signing Officer or Director

Date