

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006246

FILED  
Apr 13, 2010  
Secretary of State

Entity Name: VSR FINANCIAL SERVICES, INC.

## Current Principal Place of Business:

8620 WEST 110TH  
OVERLAND PARK, KS 662104036

## New Principal Place of Business:

8620 WEST 110TH STREET  
OVERLAND PARK, KS 662104036

## Current Mailing Address:

P.O. BOX 26250  
SHAWNEE MISSION, KS 662256250

## New Mailing Address:

FEI Number: 43-1302302      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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  
Name: RADFORD, CHRISTOPHER B  
Address: 8620 WEST 110TH STREET, SUITE 200  
City-St-Zip: OVERLAND PARK, KS 662104036

Title: VD  
Name: BEARY, DONALD J  
Address: 8620 WEST 110TH STREET  
City-St-Zip: OVERLAND PARK, KS 662104036

Title: VD  
Name: STANFIELD, JAMES M  
Address: 8620 W 110TH STREET  
City-St-Zip: OVERLAND PARK, KS 66210

Title: VSD  
Name: STANFIELD, JON M  
Address: 8620 WEST 110TH STREET  
City-St-Zip: OVERLAND PARK, KS 662104036

Title: VD  
Name: MC ANARNEY, MAUREEN C  
Address: 8620 WEST 110TH STREET, SUITE 200  
City-St-Zip: OVERLAND PARK, KS 662104036

Title: VT  
Name: QUINT, EILEEN M  
Address: 8620 WEST 110TH STREET, SUITE 200  
City-St-Zip: OVERLAND PARK, KS 662104036

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: EILEEN M. QUINT

VT

04/13/2010

Electronic Signature of Signing Officer or Director

Date