


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90501 003 \*\*\*150.00

<b>DOCUMENT # F01000006344</b>	
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1. Entity Name  
RSM EQUICO, INC.

Principal Place of Business 575 ANTON BOULEVARD 11TH FLOOR COSTA MESA, CA 92626	Mailing Address PO BOX 32208 KANSAS CITY, MO 64171-5208 US
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2. Principal Place of Business 575 Anton Blvd Suite, Apt. #, etc. 11th Floor City & State Costa Mesa CA Zip 92626 Country USA	3. Mailing Address PO Box 32208 Suite, Apt. #, etc. City & State Kansas City MO Zip 64111 Country USA
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04272005 Chg-P CR2E034 (10/03)

4. FEI Number 36-4483547	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																																																																																																								
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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 report 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 trustee empowered to 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 an attachment with an address, with all other like empowered.

**SIGNATURE:** Timothy R. Mertz 4-27-05 816-753-6900  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 20053998  
#F01000006344

**Officers:**

Rene Ordogne	President
Jacob P. Sonenshine	President, Client Services
Margaret A. Thurmond	Chief Financial Officer
William L. Trubeck	Executive Vice President
Jeffrey W. Yabuki	Executive Vice President
David M. Blackwood	Executive Vice President, Secretary and General Counsel
Steven Tait	Executive Vice President
Diane E. Forsman	Vice President, Business Development
Melanie K. Coleman	Vice President and Treasurer
Timothy R. Mertz	Assistant Treasurer
Andrea D. Bishop	Assistant Secretary

**States in which Authorized to Transact Business:**

Delaware, Florida, California