

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003516

FILED  
Feb 12, 2007  
Secretary of State

Entity Name: AMERICAN TRUST ADMINISTRATORS, INC.

## Current Principal Place of Business:

7101 COLLEGE BLVD. STE. 1200  
OVERLAND PARK, KS 66210

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 87  
SHAWNEE MISSION, KS 66201

## New Mailing Address:

FEI Number: 48-1066164

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: CDT ( ) Delete  
Name: MCNERNEY, TERRANCE J  
Address: 710 S. EAST STREET  
City-St-Zip: PAOLA, KS 66071

Title: VS ( ) Delete  
Name: BRUMBAUGH, GRETCHEN E  
Address: 104 BROADMOOR DR.  
City-St-Zip: PAOLA, KS 66053

Title: V ( ) Delete  
Name: FEATHERSTONE, BRIAN S  
Address: 18740 ALDEN LANE  
City-St-Zip: OLATHE, KS 66062

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change ( ) Addition  
Name: FOX, JAMES E  
Address: 121 W 48TH, SUITE 1401  
City-St-Zip: KANSAS CITY, MO 64112

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

Title: VT (X) Change ( ) Addition  
Name: TIMMONS, JOSEPH D  
Address: 16810 S. GRACE DRIVE  
City-St-Zip: LOUISBURG, KS 66053

Title: V ( ) Change (X) Addition  
Name: WESTROPE, KEVIN T  
Address: 5100 SUNSET DR.  
City-St-Zip: KANSAS CITY, MO 64112

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JAMES E FOX

PC

02/12/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date