

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000092

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: MAYER HOFFMAN MCCANN P.C.

## Current Principal Place of Business:

11440 TOMAHAWK CREEK PARKWAY  
LEAWOOD, KS 66211

## New Principal Place of Business:

## Current Mailing Address:

6050 OAK TREE BLVD.  
SUITE 500  
CLEVELAND, OH 44131

## New Mailing Address:

FEI Number: 43-1947695      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
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 ( ) Delete  
Name: HANCOCK, WILLIAM L  
Address: 11440 TOMAHAWK CREEK PKY  
City-St-Zip: LEAWOOD, KS 66211

Title: TD ( ) Delete  
Name: BERKOWITZ, BARRY M  
Address: 401 PLYMOUTH RD., SUITE 200  
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: SD ( ) Delete  
Name: BAUGH, ERNEST F  
Address: 5708 QUEEN AIRE LANE  
City-St-Zip: CHATTANOOGA, TN 37415

Title: VPD ( ) Delete  
Name: HOWARD, RICHARD  
Address: 2 VENTURE, STE 455  
City-St-Zip: IRVINE, CA 92618

Title: AS ( ) Delete  
Name: PERKINS, ANN  
Address: 6050 OAK TREE BLVD, STE 500  
City-St-Zip: CLEVELAND, OH 44131

Title: DIR ( ) Delete  
Name: NATION, PAUL  
Address: 10616 SCRIPPS SUMMIT COURT  
City-St-Zip: SAN DIEGO, CA 92131

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change ( ) Addition  
Name: MCLANE, CHARLES  
Address: 3101 NO CENTRAL AVENUE, STE 300  
City-St-Zip: PHOENIX, AZ 85012

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 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: ANN PERKINS

AS

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date