

F03000004799

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2005 FEB -8 AM 11:19

(Requestor's Name)

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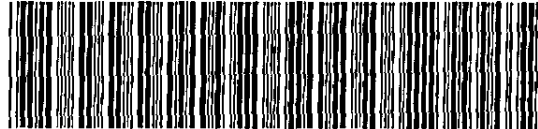
(Business Entity Name)

(Document Number)

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## FILING REQUEST

February 2, 2005

FLORIDA SECRETARY OF STATE

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|                                    |                                                |
|------------------------------------|------------------------------------------------|
| <i>Type of Filing:</i>             | CHANGE OF REGISTERED AGENT                     |
| <i>Subject(s):</i>                 | IMA OF KANSAS, INC.                            |
| <i>Form(s) Enclosed:</i>           | STATEMENT OF CHANGE OF REGISTERED OFFICE/AGENT |
| <br><i>Supporting Document(s):</i> | <br>N/A                                        |
| <i>Check Enclosed:</i>             | CHECK #18074 FOR \$35.00                       |
| <i>Return Via:</i>                 | REGULAR MAIL                                   |
| <i>Filing Method:</i>              | ASAP                                           |

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PLEASE RETURN TO: PREMIER CORPORATE SERVICES, INC.  
590 PARK STREET, SUITE 6  
ST. PAUL, MN 55103

Please call me at **1-800-227-1256** if there are any questions.

Thank you!

**Jackie Sorman**

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Kansas in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: IMA of Kansas, Inc.
2. The principal office address: 250 N Water, Suite 600, Wichita KS 67201
3. The mailing address (if different): P.O. Box 2992, Wichita KS 67201
4. Date of incorporation/qualification: 09/25/2003 Document number: F03000004799
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Starr, Paul G  
8600 Cedar Hommock Circle, E1311  
Naples, FL 34112

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.  
526 E. Park Avenue  
(P.O. Box or personal mailbox NOT acceptable)  
Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Anita Z. Bourke Anita Z. Bourke, President  
(Signature of an officer or director) (Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

NRAI Services, Inc.  
by: [Signature] 2/3/2005  
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

Jackie Sorman Assistant Secretary  
(Typed or Printed Name) (Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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