

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005881

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: ASSURED VEHICLE PROTECTION, INC.

## Current Principal Place of Business:

800 WEST 47TH ST. SUITE 525  
KANSAS CITY, MO 64112

## New Principal Place of Business:

4801 MAIN  
SUITE 310  
KANSAS CITY, MO 64112

## Current Mailing Address:

800 WEST 47TH ST. SUITE 525  
KANSAS CITY, MO 64112

## New Mailing Address:

PO BOX 30129  
KANSAS CITY, MO 64112

FEI Number: 03-0392087

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LITTLE, MICHAEL G  
911 CHESTNUTT STREET  
CLEARWATER, FL 33756 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: CPST ( ) Delete  
Name: MCKENNY, JOSEPH M  
Address: 800 WEST 47TH ST. SUITE 525  
City-St-Zip: KANSAS CITY, MO 64112

Title: VCVP ( ) Delete  
Name: MCKENNY, JOHN P  
Address: 800 WEST 47TH ST. SUITE 525  
City-St-Zip: KANSAS CITY, MO 64112

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPST (X) Change ( ) Addition  
Name: MCKENNY, JOSEPH M  
Address: PO BOX 30129  
City-St-Zip: KANSAS CITY, MO 64112

Title: VCVP (X) Change ( ) Addition  
Name: MCKENNY, JOHN P  
Address: PO BOX 30129  
City-St-Zip: KANSAS CITY, MO 64112

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: JOSEPH M MCKENNY

CPST

04/22/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date