2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000265

Entity Name: KANSAS CREATIVE MARKETING INTERNATIONAL CORPORATION

FILED Apr 01, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
7415 W 130TH ST #300 OVERLAND PARK, KS 66213				7415 W 130TH ST #300 OVERLAND PARK, KS 66213		
Current Mailing Address:				New Mailing Address:		
PO BOX 25958 OVERLAND PARK, KS 662255958				7415 W 130TH ST #300 OVERLAND PARK, KS 66213		
FEI Number:	: 48-0992718	FEI Number Applied For ()	FEI Nun	nber Not Appl	licable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of	New Registered Agent:
1200 SOU PLANTATI	PORATION SYS TH PINE ISLAN ION, FL 33324	ND ROAD US	rpose o	f changing i	ts reaistered	office or registered agent, or both,
in the State	e of Florida.		.			
SIGNATU						
	Electron	ic Signature of Registered Agen	t			Date
Election Car	mpaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip: Title:	ESSARY, RONA 7415 W 130TH OVERLAND PAR	ST #300		Title: Name: Address: City-St-Zip: Title:	TRIPSES, MIC 7415 W 130T OVERLAND F	
Name: Address: City-St-Zip:	MONEYMAKER 7415 W 130TH OVERLAND PAI	ST #300		Name: Address: City-St-Zip:	MONEYMAKE 7415 W 130T OVERLAND F	
Title: Name: Address: City-St-Zip:	D () HEITZ, MARK 7415 W 130TH OVERLAND PAI			Title: Name: Address: City-St-Zip:	HEITZ, MARK 555 S. KANSA	AS AVENUE
Title: Name: Address: City-St-Zip:	D () MILLER, MICHA 7415 W 130TH OVERLAND PAR	ST #300		Title: Name: Address: City-St-Zip:	D (MILLER, MICI 555 S. KANSA TOPKEA, KS	AS AVENUE
Title: Name: Address: City-St-Zip:	V () TRIPSES, MICH 7415 W 130TH OVERLAND PAR	ST #300		Title: Name: Address: City-St-Zip:	D (MARK, HAMN 555 S. KANSA TOPEKA, KS	AS AVENUE
Title: Name: Address: City-St-Zip:	V () POJE, PHILIP A 7415 W 130TH OVERLAND PAI	ST #300		Title: Name: Address: City-St-Zip:	D (MIKE, DICKE 555 S. KANSA TOPEKA, KS	AS AVENUE

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: WILLIAM MONEYMAKER CFO 04/01/2008