

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000265

FILED  
Apr 23, 2012  
Secretary of State

**Entity Name:** KANSAS CREATIVE MARKETING INTERNATIONAL CORPORATION

**Current Principal Place of Business:**

11460 TOMAHAWK CREEK PARKWAY  
LEAWOOD, KS 66211

**New Principal Place of Business:**

**Current Mailing Address:**

11460 TOMAHAWK CREEK PARKWAY  
LEAWOOD, KS 66211

**New Mailing Address:**

**FEI Number:** 48-0992718

**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

## OFFICERS AND DIRECTORS:

Title: PRES  
Name: TRIPSES, MICHAEL R  
Address: 11460 TOMAHAWK CREEK PARKWAY  
City-St-Zip: LEAWOOD, KS 66211

Title: CFO  
Name: MONEYMAKER, WILLIAM  
Address: 11460 TOMAHAWK CREEK PARKWAY  
City-St-Zip: LEAWOOD, KS 66211

Title: D  
Name: HEITZ, MARK  
Address: 555 S. KANSAS AVENUE  
City-St-Zip: TOPEKA, KS 66603

Title: D  
Name: MILLER, MICHAEL  
Address: 555 S. KANSAS AVENUE  
City-St-Zip: TOPKEA, KS 66603

Title: D  
Name: MIKE, DICKERSON  
Address: 555 S. KANSAS AVENUE  
City-St-Zip: TOPEKA, KS 66603

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM MONEYMAKER

CFO

04/23/2012

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

\_\_\_\_\_  
Date