2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 02, 2006
Secretary of State

DOCUMENT# F93000000715

Entity Name: FAULTLESS STARCH/BON AMI COMPANY

Current Principal Place of Business:

1025 W. 8TH STREET
KANSAS CITY, MO 64101

New Principal Place of Business:

Current Mailing Address:

1025 W. 8TH STREET
KANSAS CITY, MO 64101

New Mailing Address:

FEI Number: 44-0243890 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: BEAHAM, GORDON T III
Address: 5757 WINDSOR
City-St-Zip: SHAWNEE MISSION, KS 66025

Title: P ( ) Delete
Name: BEAHAM, DAVID
Address: 6035 CHEREOKE DR
City-St-Zip: FAIRWAY, KS 66205

Title: T ( ) Delete
Name: BEAHAM, ROBERT
Address: 3806 W 57TH TERR
City-St-Zip: MISSION, KS 66205

Title: COO ( ) Delete
Name: OSBORN, NANCY
Address: 301 LANDINGS COURT
City-St-Zip: LEE'S SUMMIT, MO 64064

Title: VD ( ) Delete
Name: HAMPSHIRE, ADRIAN J
Address: 16411 E. DEBRA STREET
City-St-Zip: INDEPENDENCE, MO

Title: D ( ) Delete
Name: BEAHAM, NANCY
Address: 5767 WINDSOR CIR.
City-St-Zip: SHAWNEE MISSON, KS 66205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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 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: NANCY OSBORN COO 08/02/2006

Electronic Signature of Signing Officer or Director — Date