

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000000715

FILED  
Apr 30, 2008  
Secretary of State

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 ( )

## 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 CHEROKEE DR  
City-St-Zip: FAIRWAY, KS 66205

Title: T ( ) Delete  
Name: BEAHAM, ROBERT  
Address: 5905 REINHARDT DR.  
City-St-Zip: FAIRWAY, KS 66205

Title: O ( ) Delete  
Name: WOOD, WILLIAM  
Address: 9217 REDBUD LANE  
City-St-Zip: LENEXA, KS 66220

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 MISSION, 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 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: DAVID BEAHAM

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date