

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000004038

FILED
Mar 09, 2010
Secretary of State

Entity Name: SFS INSURANCE BROKERAGE, INC.

Current Principal Place of Business:

3520 BROADWAY
KANSAS CITY, MO 64111 US

New Principal Place of Business:

Current Mailing Address:

3520 BROADWAY
KANSAS CITY, MO 64111 US

New Mailing Address:

FEI Number: 91-0837062 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC,
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: T
Name: LAIRD, DAVID
Address: 3520 BROADWAY
City-St-Zip: KANSAS CITY, MO 64111

Title: PD
Name: OLBERDING, BRUCE
Address: 3520 BROADWAY
City-St-Zip: KANSAS CITY, MO 64111

Title: SD
Name: MASON, CRAIG
Address: 3520 BROADWAY
City-St-Zip: KANSAS CITY, MO 64111

Title: VP
Name: DENNEY, SUSANNA
Address: 3520 BROADWAY
City-St-Zip: KANSAS CITY, MO 64111

Title: D
Name: DUFFY, CHARLES
Address: 3520 BROADWAY
City-St-Zip: KANSAS CITY, MO 64111

Title: VP
Name: KREBS, DON
Address: 3520 BROADWAY
City-St-Zip: KANSAS CITY, MO 64111

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: BRUCE OLBERDING

PD

03/09/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date