

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002868

FILED
Apr 19, 2006
Secretary of State

Entity Name: SEARLES VALLEY MINERALS OPERATIONS INC.

Current Principal Place of Business:

9401 INDIAN CREEK PARKWAY
BUILDING 40, SUITE 1000
OVERLAND PARK, KS 66210

New Principal Place of Business:

Current Mailing Address:

9401 INDIAN CREEK PARKWAY
BUILDING 40, SUITE 1000
OVERLAND PARK, KS 66210

New Mailing Address:

FEI Number: 13-3579263

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPAS () Delete
Name: DOWD, MATTHEW J
Address: 16 MAPLE AVENUE
City-St-Zip: MONTVALE, NJ 07645

Title: P () Delete
Name: TANCREDI, JOHN F
Address: 9401 INDIAN CREEK PKWY, SUITE 1000
City-St-Zip: OVERLAND PARK, KS 66210

Title: VP () Delete
Name: COLE, STEPHEN W
Address: 9401 INDIAN CREEK PKWY, SUITE 1000
City-St-Zip: OVERLAND PARK, KS 66210

Title: VP () Delete
Name: PURI, AVINASH
Address: 9401 INDIAN CREEK PKWY, SUITE 1000
City-St-Zip: OVERLAND PARK, KS 66210

Title: VP () Delete
Name: DITERESI, EMANUEL
Address: 9401 INDIAN CREEK PKWY STE 1000
City-St-Zip: OVERLAND PARK, KS 66210

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:

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: EMANUEL J. DITERESI

VP

04/19/2006

Electronic Signature of Signing Officer or Director

_____ Date