

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001501

FILED
Apr 24, 2008
Secretary of State

Entity Name: THE INVIRONMENTALISTS COMMERCIAL SERVICES COMPANY

Current Principal Place of Business:

4123 E. 37TH STREET NORTH
WICHITA, KS 67220

New Principal Place of Business:

Current Mailing Address:

4123 E. 37TH NORTH
WICHITA, KS 67220

New Mailing Address:

4123 E. 37TH STREET NORTH
WICHITA, KS 67220

FEI Number: 94-3019044

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: P () Delete
Name: JARGO, DEAN
Address: 4123 E. 37TH ST NORTH
City-St-Zip: WICHITA, KS 67220

Title: CFO () Delete
Name: DOUTHET, DAVID
Address: DELETE - NO LONGER CFO
City-St-Zip: KENNESAW, GA 30144

Title: D () Delete
Name: CARTER, STEVEN
Address: 4123 E. 37TH ST. NORTH
City-St-Zip: WICHITA, KS 67220

Title: S (X) Delete
Name: CARTER, STEVEN
Address: 4123 E. 37TH STREET NORTH
City-St-Zip: WICHITA, KS 67220

Title: D () Delete
Name: KROMER, STEPHEN
Address: 4123 E. 37TH ST. NORTH
City-St-Zip: WICHITA, KS 67220

Title: D () Delete
Name: MATHEWS, REAGAN
Address: 4123 E. 37TH ST. NORTH
City-St-Zip: WICHITA, KS 67220

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HARRISON, TOBY
Address: 4123 E. 37TH ST NORTH
City-St-Zip: WICHITA, KS 67220

Title: S (X) Change () Addition
Name: CONTOIS, KATHIE
Address: 4123 E. 37TH STREET NORTH
City-St-Zip: WICHITA, KS 67220

Title: D (X) Change () Addition
Name: CONTOIS, KATHIE
Address: 4123 E. 37TH ST. NORTH
City-St-Zip: WICHITA, KS 67220

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: REAGAN MATHEWS

D

04/24/2008

Electronic Signature of Signing Officer or Director

Date