

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002487

FILED  
Jan 07, 2004  
Secretary of State

**Entity Name:** LIFTTRUCKS FINANCIAL SERVICES, INC.

**Current Principal Place of Business:**

7727 WHITEBRIDGE GLEN  
UNIVERSITY PARK, FL 34201

**New Principal Place of Business:**

57 SUGAR MILL DRIVE  
OSPREY, FL 34229

**Current Mailing Address:**

4420 MADISON  
STE 180  
KANSAS CITY, MO 64111

**New Mailing Address:**

FEI Number: 43-1084556      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ELTONHEAD, ROBERT F  
7727 WHITEBRIDGE GLEN  
UNIVERSITY PARK, FL 34201      US

**Name and Address of New Registered Agent:**

ELTONHEAD, ROBERT F  
57 SUGAR MILL DRIVE  
OSPREY, FL 34229      US

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

01/07/2004

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CPT      ( ) Delete  
Name: ELTONHEAD, ROBERT F  
Address: 7727 WHITEBRIDGE GLEN  
City-St-Zip: UNIVERSITY PARK, FL 34201

Title: S      ( ) Delete  
Name: WHITAKER, WILLIAM P  
Address: 4420 MADISON STE 180  
City-St-Zip: KANSAS CITY, MO 64111

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CPT      (X) Change ( ) Addition  
Name: ELTONHEAD, ROBERT F  
Address: 57 SUGAR MILL DRIVE  
City-St-Zip: OSPREY, FL 34229

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 Section 119.07(3)(i), 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: WILLIAM P. WHITAKER

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01/07/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date