2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2006
Secretary of State

DOCUMENT# F99000000378

Entity Name: BASIC FINANCIAL SOLUTIONS, INC.

Current Principal Place of Business:

999 W. RIVERSIDE
SPOKANE, WA 99210

New Principal Place of Business:

Current Mailing Address:

999 W. RIVERSIDE
SPOKANE, WA 99210

New Mailing Address:

FEI Number: 91-1940573 **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: PVC ( ) Delete
Name: COWLES, ELIZABETH A
Address: 999 W. RIVERSIDE
City-St-Zip: SPOKANE, WA 99210

Title: V ( ) Delete
Name: CRAIGEN, MICHAEL
Address: 999 W. RIVERSIDE
City-St-Zip: SPOKANE, WA 99210

Title: ST ( ) Delete
Name: RECTOR, STEVEN R
Address: 999 W. RIVERSIDE
City-St-Zip: SPOKANE, WA 99210

Title: D ( ) Delete
Name: COWLES, W. S
Address: 999 W. RIVERSIDE
City-St-Zip: SPOKANE, WA 99210

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:

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: STEVEN R RECTOR ST 03/17/2006

Electronic Signature of Signing Officer or Director Date