## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M0400001026

4123 E 37TH ST NORTH

WICHITA, KS 67220

Address:

City-St-Zip:

Entity Name: INVISTA S.A.R.L., LLC

FILED Apr 26, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4123 E 37TH ST NORTH WICHITA, KS 672201979 **Current Mailing Address: New Mailing Address:** 4123 E 37TH ST NORTH WICHITA, KS 672201979 FEI Number: 98-0196061 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Delete (X) Change ( ) Addition GREGORY, GEORGE B GREGORY, GEORGE B Name: Name: 15710 JOHN F. KENNEDY BLVD. Address: DELETE - NO LONGER MANAGER Address: City-St-Zip: HOUSTON, TX 77032 City-St-Zip: HOUSTON, TX 77032 Title: MGR () Delete Title: MGR (X) Change ( ) Addition DUFFY, STEPHEN W Name: DUFFY, STEPHEN W Name: Address: 15710 JOHN F. KENNEDY BLVD. Address: DELETE - NO LONGER MANAGER City-St-Zip: HOUSTON, TX 77032 City-St-Zip: HOUSTON, TX 77032 Title: MGR () Delete Title: MGR (X) Change ( ) Addition MOELLER, JOSEPH W MOELLER, JOSEPH W Name: Name: Address: 4111 E. 37TH ST. NORTH Address: DELETE NO LONGER MANAGER City-St-Zip: WICHITA, KS 67220 City-St-Zip: WICHITA, KS 67220 Title: MGR ( ) Delete Title: () Change () Addition Name: MUNSON, CRAIG Name: Address: 4123 E 37TH ST. NORTH Address: City-St-Zip: WICHITA, KS 67220 City-St-Zip: Title: MGR () Delete Title: () Change () Addition VONCANNON, JAY Name: Name:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: CRAIG MUNSON MGR 04/26/2006