FILED Mar 24, 2006 8:00 am Secretary of State

UNIFORM BUSINESS REPORT (UBR) 03-24-2006 90039 004 ***158.75 DOCUMENT # POOCOCO 21034 1. Entity Name 50005572 DO NOT WRITE IN THIS SPACE 3. Mailing Address 2. Principal Place of Business 4025 NE Lakewood Way, Suite 130 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 18-1227118 ees Summit, MO Not Applicable Country Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 64064 7. Name and Address of Current Registered Agent Name Glen Alber DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) 990 S. Rogers Circle IN THIS SPACE Zip Code Boca Raton 8. 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. I am familiar with, and accept the obligations of registered agent. Glen Alber **SIGNATURE** 2/1/2006 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE January 1 - May 1 Fee is \$150.00 Se ... After May 1, Fee is \$550.00 Amended UBR is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS
President & Director 11. 10. TITLE TITLE NAME Edward Rafter NAME STREET ADDRESS 11323 Grandview STREET ADDRESS Overland Park, KS 66210 CITY-ST-ZIP CITY-ST-ZIP Treasurer & Director TITLE TITLE NAME Mark Hartfiel NAME STREET ADDRESS 1009 NE Kenwood Drive STREET ADDRESS CITY-ST-ZIP ee's Summit, MO 64064 CITY-ST-ZIP Secretary & Director TITLE NAME Ed Rogers NAME 14580 W 152nd Place STREET ADDRESS STREET ADDRESS DO NOT WRITE Olathe, KS 66062 CITY-ST-ZIP CITY-ST-ZIP IN THIS SPACE TITI F TILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE me NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME .. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 gapte appears in Block 10 or on an attachment with an address, with all other like empowered. 02-09-06 SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FOR PROFIT CORPORATION



ATTACHMENT 50005572

FLORIDA DEPARTMENT OF STATE Division of Corporations

March 13, 2006

API, INC. 4025 NE LAKEWOOD WAY SUITE 130 LEES SUMMIT, MO 64064

SUBJECT: APL INC.

Ref. Number: P00000021034

Please be advised, we have received your annual report/uniform business report for the above corporation; however, the report <u>has not been filed</u> and a copy is being returned for the following:

The fee to file the enclosed profit annual report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner Senior Section Administrator

Letter Number: 206A00017109.