

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 16, 2004 8:00 am**  
**Secretary of State**

04-16-2004 90103 018 \*\*\*150.00

**DOCUMENT # P03571**

1. Entity Name  
**PREMIUM FINANCING SPECIALISTS, INC.**



Principal Place of Business  
**427 WEST 12TH ST.  
SUITE 100  
KANSAS CITY, MO 64105 US**

Mailing Address  
**427 WEST 12TH ST.  
SUITE 100  
KANSAS CITY, MO 64105 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03192004 Chg-P CR2E034 (10/03)

4. FEI Number

**43-1039872**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHIEF FINANCIAL OFFICER  
PO BOX 6200 32314-6200  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P**  
NAME **CHARBONNEAU, THOMAS J.** ☐ Delete  
STREET ADDRESS **6411 HILLSIDE**  
CITY-STATE-ZIP **SHAWNEE, KS 66218**

TITLE **CEO** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE **VP**  
NAME **ANDRES, BRYAN J** ☐ Delete  
STREET ADDRESS **5011 MCCOY**  
CITY-STATE-ZIP **SHAWNEE, KS 66226**

TITLE **V/T** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **5625 Roundtree**  
CITY-STATE-ZIP **Shawnee KS 66226**

TITLE **ST**  
NAME **DARVEAUX, NORENE** ☐ Delete  
STREET ADDRESS **1200 W. NETTLETON**  
CITY-STATE-ZIP **INDEPENDENCE, MO**

TITLE **Asst Secy** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE **D**  
NAME **MERRIMAN, MICHAEL A.** ☐ Delete  
STREET ADDRESS **6435 INDIAN LANE**  
CITY-STATE-ZIP **SHAWNEE MISSION, KS**

TITLE **C/D** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE **V**  
NAME **FELLER, DAVID J.** ☐ Delete  
STREET ADDRESS **867 EAST FIRST STREET**  
CITY-STATE-ZIP **PECULIAR, MO**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE **D** ☒ Delete  
NAME **MULLER, GARY L.** ☐ Add  
STREET ADDRESS **2102 W 87 TERRACE**  
CITY-STATE-ZIP **SHAWNEE MISSION, KS**

TITLE **COMPLETE ROSTER ATTACHED** ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-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 name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Bryan J Andres*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Bryan J Andres April 7, 2004**

Date

**816-627-0500**

Daytime Phone #

*Attachment*

*44029698*  
*Doc P03571*

## PREMIUM FINANCING SPECIALISTS, INC.

effective March 1, 2004

OFFICE ADDRESS

### OFFICERS:

<b>Chairman</b>	Michael A. Merriman	300 West 11th Street	Kansas City	MO	64105
<b>Chief Executive Officer</b>	Thomas J. Charbonneau	427 West 12th Street, Suite 100	Kansas City	MO	64105
<b>President and Chief Operating Officer</b>	Mike Gallagher	427 West 12th Street, Suite 100	Kansas City	MO	64105
<b>Exec Vice President and Chief Financial Officer</b>	Bryan J Andres	427 West 12th Street, Suite 100	Kansas City	MO	64105
<b>Secretary</b>	Kevin Brown	427 West 12th Street, Suite 100	Kansas City	MO	64105
<b>Treasurer</b>	Bryan J Andres	427 West 12th Street, Suite 100	Kansas City	MO	64105
<b>Vice President</b>	David J. Feller	13520 Wyandotte	Kansas City	MO	64145
<b>Vice President</b>	Jim Bennett	5316 Hwy 290 West, Suite 310	Austin	TX	78735
<b>Vice President</b>	Herb Chirico	427 West 12th Street, Suite 100	Kansas City	MO	64105
<b>Vice President</b>	Theodore J. Koeth	2890 Niagara Falls Blvd.	Amherst	NY	14228
<b>Asst Vice President</b>	John Binaggio	13520 Wyandotte	Kansas City	MO	64145
<b>Asst Vice President</b>	Scott Marr	1800 St. Julian Place, #405	Columbia	SC	29204
<b>Assistant Secretary</b>	Norene F. Darveaux	427 West 12th Street, Suite 100	Kansas City	MO	64105
<b>Assistant Secretary</b>	Michael A. Merriman	300 West 11th Street	Kansas City	MO	64105

### DIRECTORS:

Thomas J. Charbonneau	427 West 12th Street, Suite 100	Kansas City	MO	64105
Michael A. Merriman	300 West 11th Street	Kansas City	MO	64105
Marybeth M. Sotos	300 West 11th Street	Kansas City	MO	64105