


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90353 022 ***150.00

DOCUMENT # P05915

1. Entity Name
PERFORMANCE CONTRACTING, INC. OF KANSAS



Principal Place of Business 208 EAST WOODLAWN RD STE. 200 CHARLOTTE, NC 28217 US	Mailing Address 208 EAST WOODLAWN RD STE. 200 CHARLOTTE, NC 28217 US
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2. Principal Place of Business Suite, Apt. #, etc. 16400 COLLEGE BLVD.	3. Mailing Address Suite, Apt. #, etc. 16400 COLLEGE BLVD.
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City & State Lenexa, Ks.	City & State Lenexa, Ks.
Zip 66219	Country U.S.

03222006 Chg-P CR2E034 (11/05)

4. FEI Number
34-1467168

5. Certificate of Status Desired **\$8.75 Additional Fee Required**



6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

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 _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 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 D	DAVIS, CRAIG D <input type="checkbox"/> Delete	TITLE AS	16400 College Blvd. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	16047 W. 110TH ST.	NAME	16400 College Blvd.
STREET ADDRESS	LENEKA, KS 66219	STREET ADDRESS	16400 College Blvd.
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE AS	LAPHAM, D.D. <input type="checkbox"/> Delete	TITLE AS	16400 College Blvd. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	16047 W 110TH STREET	NAME	16400 College Blvd.
STREET ADDRESS	LENEKA, KS 66219	STREET ADDRESS	16400 College Blvd.
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE P	DAVIS, CRAIG D <input type="checkbox"/> Delete	TITLE AS	16400 College Blvd. <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	16047 W. 110TH ST.	NAME	208 E WOODLAND RD STE 200
STREET ADDRESS	LENEKA, KS 66219	STREET ADDRESS	CHARLOTTE, NC 28217
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE T	FOOTE, WILLIAM M <input type="checkbox"/> Delete	TITLE AS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	16047 W. 110TH ST.	NAME	
STREET ADDRESS	LENEKA, KS 66219	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE AS	VAN PELT, NANCY <input type="checkbox"/> Delete	TITLE AS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	208 E WOODLAND RD STE 200	NAME	
STREET ADDRESS	CHARLOTTE, NC 28217	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Douglas Lapham **Douglas Lapham** 3/22/06 913-310-8394
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT
40842405
P05915

NOTICE OF CHANGE OF MAILING ADDRESS

Please note the following change of mailing address for the following:

Performance Contracting, Inc.

Account Number _____

The new mailing address is as follows:

Performance Contracting, Inc.


ATTN: TAX DEPT.

16400 College Blvd.

Lenexa, KS 66219

Please update your records. If you have any questions please contact Maureen Vasquez at 913-310-3395.

Sincerely,
Performance Contracting, Inc.


Doug Lapham
Manager, Corporate Tax