

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000026238

FILED
Mar 22, 2007
Secretary of State

Entity Name: MIDWEST HEARTLAND RESTAURANT GROUP INC.

Current Principal Place of Business:

1908 SENTRY OAK COURT
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

8131 LONGVIEW ROAD
LENEXA, KS 66220

Current Mailing Address:

1908 SENTRY OAK COURT
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

8131 LONGVIEW ROAD
LENEXA, KS 66220

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAROLISE, DEBORAH A
1908 SENTRY OAK COURT
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

PAROLISE, DEBORAH A
111 BAY LAKE DRIVE
ORMOND BEACH, FL 32714 US

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:

03/22/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: PAROLISE, DEBORAH A
Address: 1908 SENTRY OAK COURT
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: PAROLISE, DEBORAH A
Address: 8131 LONGVIEW ROAD
City-St-Zip: LENEXA, KS 66220

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: DEBORAH A. PAROLISE

PTS

03/22/2007

Electronic Signature of Signing Officer or Director

Date