

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07661

FILED
Apr 28, 2006
Secretary of State

Entity Name: FFP ADVISORY SERVICES, INC.

Current Principal Place of Business:

15455 CONWAY ROAD, 2ND FL
CHESTERFIELD, MO 63017

New Principal Place of Business:

15455 CONWAY ROAD
CHESTERFIELD, MO 63017

Current Mailing Address:

15455 CONWAY ROAD, 2ND FL
CHESTERFIELD, MO 63017

New Mailing Address:

15455 CONWAY ROAD
CHESTERFIELD, MO 63017

FEI Number: 43-0989354

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JUNKINS, CRAIG A
Address: 15455 CONWAY RD
City-St-Zip: CHESTERFIELD, MO 63017

Title: S (X) Delete
Name: ELLIOTT, KIMBERLY SHAW
Address: 15455 CONWAY RD
City-St-Zip: CHESTERFIELD, MO 63017

Title: CFOD (X) Delete
Name: YOUNT, JEFFREY
Address: 15455 CONWAY ROAD
City-St-Zip: CHESTERFIELD, MO 63017

Title: D (X) Delete
Name: HATTON, ROBERT
Address: 18101 MELROSE RD
City-St-Zip: WILDWOOD, MO 63038

Title: D (X) Delete
Name: RODERMUND, ROBIN
Address: 17134 SURREY VIEW DRIVE
City-St-Zip: CHESTERFIELD, MO 63005

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HATTON, ROBERT
Address: 15455 CONWAY RD
City-St-Zip: CHESTERFIELD, MO 63017

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT HATTON

PRES

04/28/2006

Electronic Signature of Signing Officer or Director

Date