2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P13103

Entity Name: BIRCHTREE FINANCIAL SERVICES, INC.

Current Principal Place of Business:

801 NICOLLET AVENUE
SUITE 1100 WEST TOWER
MINNEAPOLIS, MN 55402 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 32208
KANSAS CITY, MO 641715208 US

New Mailing Address:

FEI Number: 43-1411418 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND
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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PHILLIPS, DALE S
Address: 801 NICOLLET AVENUE, SUITE 1100 WEST TOWER
City-St-Zip: MINNEAPOLIS, MN 55402 US

Title: V ( ) Delete
Name: HENTZ, ANNETTE K
Address: 801 NICOLLET AVENUE, SUITE 1100 WEST TOWER
City-St-Zip: MINNEAPOLIS, MN 55402 US

Title: S ( ) Delete
Name: RIPPBERGER, THOMAS
Address: 801 NICOLLET AVENUE, SUITE 1100 WEST TOWER
City-St-Zip: MINNEAPOLIS, MN 55402 US

Title: D ( ) Delete
Name: PHILLIPS, DALE S
Address: 801 NICOLLET AVENUE, SUITE 1100 WEST TOWER
City-St-Zip: MINNEAPOLIS, MN 55402 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition
Name: LUBBEN, VICKI M
Address: 3600 AMERICAN BLVD. WEST. 3RD FLOOR
City-St-Zip: BLOOMINGTON, MN 554311082 US

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

Title: T ( ) Change (X) Addition
Name: FERRICK, CHRISTOPHER D
Address: ONE MORROWCROFT CENTER, STE 200
City-St-Zip: CHARLOTTE, NC 282113551 US

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: DALE S. PHILLIPS P 05/01/2006

Electronic Signature of Signing Officer or Director Date