



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 119985		2. Name of Corporation PERFORMANCE ABATEMENT SERVICES, INC.		
3. Street Address Principal Business Office 208 East Woodlawn Road Suite 200		City Charlotte	State NC	Zip 28217
4. Business Phone No. 704-529-8000		5. State of Incorporation DELAWARE		6. SIC Code 238900
7. Brief Description of the Character of Business Conducted in Rhode Island ASBESTOS, LEAD AND MOLD ABATEMENT				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Glenn E. Faye		Vice President Name Dannell E. Bailey		
Street Address 16047 WEST 110TH STREET		Street Address E. 6621 Mission Avenue		
City Lenexa	State KS	Zip 66219	City Spokane	State WA
Secretary Name Charles F. Williams		Treasurer Name William M. Foote		
Street Address 16047 WEST 110TH STREET		Street Address 16047 WEST 110TH STREET		
City Lenexa	State KS	Zip 66219	City Lenexa	State KS
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Craig D. Davis		Director Name		
Street Address 16047 WEST 110TH STREET		Street Address		
City Lenexa	State KS	Zip 66219	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES				
Number of Shares	Class Series	Par Value	Number of Shares	Class Series
1,000 COMM \$1.00 PAR VALUE			100	Common
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
ISSUED SHARES				
Number of Shares	Class Series	Par Value	Number of Shares	Class Series

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



119985

FILED

File Date
MAY 20 2005

Check No.
By LB

By

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer
Nancy Van Pelt

Date
2/16/05

Print or Type Name of Officer
Nancy Van Pelt

Title of Officer
Assistant Secretary

2005 annual

Performance Abatement Services, Inc.

Listing of Officers and Directors

Incorporation Date: 2/19/87
Incorporation State: Delaware
Federal ID Number: 56-1552573

DIRECTORS:

Craig D. Davis

Business
Address
16047 West 110th
Lenexa, KS 66219

OFFICERS:

Glenn E. Fryc

Title
President

16047 West 110th
Lenexa, KS 66219

Social Security
Available on Request
Residence
Address & Phone
6404 Gladstone Drive
Shawnee, KS 66218
(913) 248-0215

Darrell E. Bailey

Vice President

E. 6621 Mission Ave.
Spokane, WA 99212

Available on Request S. 9401 Stevens Creek Rd.
Spokane, WA 99223
(509) 448-3460

William M. Foote

Treasurer/CFO

16047 West 110th
Lenexa, KS 66219

Available on Request 8440 Maurer Road, # 1221
Lenexa, KS 66219
(913) 432-4452

Charles F. Williams

Secretary

16047 West 110th
Lenexa, KS 66219

Available on Request 14708 Grandview
Overland Park, KS 66221
(913) 685-3143

Douglas D. Lapham

Asst. Secretary

16047 West 110th
Lenexa, KS 66219

Available on Request 5721 W. 146th Street
Overland Park, KS 66223
(913) 814-9517

Nancy J. Van Pelt

Asst. Secretary

208 E. Woodlawn Rd.
Suite 200
Charlotte, NC 28217

Available on Request 603 Ridgeway Dr.
Belmont, NC 28012
(704) 825-2901

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 119985		2. Name of Corporation PERFORMANCE ABATEMENT SERVICES, INC.			
3. Street Address Principal Business Office 208 East Woodlawn Road, Suite 200			City Charlotte	State NC	Zip 28217
4. Business Phone No. 704-529-8000		5. State of Incorporation DELAWARE			6. SIC Code 235420
7. Brief Description of the Character of Business Conducted in Rhode Island ASBESTOS, LEAD AND MOLD ABATEMENT					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Glen E. Frye			Vice President Name		
Street Address 16047 W. 110th Street			Street Address		
City Lenexa	State KS	Zip 66219	City	State	Zip
Secretary Name Charles F. Williams			Treasurer Name William M. Foote		
Street Address 16047 W. 110th Street			Street Address 16047 W. 110th Street		
City Lenexa	State KS	Zip 66219	City Lenexa	State KS	Zip 66219
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Craig D. Davis			Director Name		
Street Address 16047 W. 110th Street			Street Address		
City Lenexa	State KS	Zip 66219	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 COMM \$1.00 PAR VALUE			100	Common	1
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 1 9 9 8 5 *

File Date 1/26/04
 Check No. 00803249
 By: ME

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Nancy J. Van Pelt 1/26/04
 Signature of Officer Date

Nancy J. Van Pelt
 Print or Type Name of Officer

Assistant Secretary
 Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **119985** 2. Name of Corporation **PERFORMANCE ABATEMENT SERVICES, INC.**
3. Street Address Principal Business Office **208 East Woodlawn Road, Suite 200 Charlotte NC 28217**
4. Business Phone No. **704-529-8047** 5. State of Incorporation **DELAWARE** 6. SIC Code **235420**
7. Brief Description of the Character of Business Conducted in Rhode Island **Asbestos Abatement**

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Glenn E. Frye	Vice President Name
Street Address 16047 W. 110th	Street Address
City LENEXA State KS Zip 66219	City State Zip
Secretary Name Charles F. Williams	Treasurer Name William M. Foote
Street Address 16047 W. 110th	Street Address
City LENEXA State KS Zip 66219	City State Zip LENEXA KS 66219

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Craig D. Davis	Director Name
Street Address 16047 W. 110th	Street Address
City LENEXA State KS Zip 66219	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
1,000 COMM \$1.00 PAR VALUE		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	\$1

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 1 9 9 8 5 *

File Date: **3.3.03**

Check No.: **804448**

By: **UP**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer **Nancy J. Van Pelt** Date **2/18/03**

Print or Type Name of Officer **Nancy J. Van Pelt**

Title of Officer **Assistant Secretary**



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **119985** 2. Name of Corporation **PERFORMANCE ABATEMENT SERVICES, INC.**
3. Street Address Principal Business Office **208 E. Woodlawn Rd., Ste 200** City **Charlotte** State **NC** Zip **28227**
4. Business Phone No. **704-529-8016** 5. State of Incorporation **DELAWARE** 6. SIC Code **235420**

7. Brief Description of the Character of Business Conducted in Rhode Island

Asbestos Abatement

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name Glenn E. Frye Street Address 16047 West 110th City Lenexa State KS Zip 66219	Vice President Name Street Address City State Zip
Secretary Name Charles F. Williams Street Address 16047 West 110th City Lenexa State KS Zip 66219	Treasurer Name William M. Foote Street Address 16047 West 110th City Lenexa State KS Zip 66219

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name Craig R. Fallon Street Address 16047 West 110th City Lenexa State KS Zip 66219	Director Name Street Address City State Zip
Director Name Street Address City State Zip	Director Name Street Address City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
1,000 COMM \$1.00 PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
100 Common \$1

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 1 9 9 8 5 *

File Date: **3-4-02**

Check No.: **00836567**

By: **KM**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Doug Lapham 2/21/02
Signature of Officer Date

Doug Lapham
Print or Type Name of Officer

Assistant Secretary
Title of Officer