

1.) CORPORATION NAME:

**MIDWEST RESEARCH INSTITUTE**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802**

DUE DATE: **6/30/2011**

SCC ID NO: **F0511362**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  
**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:  
**MO**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 425 VOLKER BLVD

CITY/ST/ZIP: KANSAS CITY, MO 64110-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MICHAEL F HELMSTETTER PHD	
TITLE:	PRES/CEO	
ADDRESS:	425 VOLKER BLVD	
CITY/ST/ZIP/CO:	KANSAS CITY, MD 64110-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	THOMAS M SACK PHD	
TITLE:	SR VP	
ADDRESS:	425 VOLKER BLVD	
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64110-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	RICHARD THOMAS FLEENER	
TITLE:	CFO	
ADDRESS:	425 VOLKER BLVD	
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64110-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	RICHARD C GREEN JR	
TITLE:	DIRECTOR	
ADDRESS:	1800 BALTIMORE STE 300	
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64108-	

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ RICHARD THOMAS FLEENER</u>	RICHARD THOMAS FLEENER,	<u>6/28/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CFO PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.