## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED Mar 21, 2001 8:00 am **DOCUMENT # 834578** Secretary of State 1. Entity Name HAAS, WILKERSON, & WOHLBERG, INC. 03-21-2001 90017 002 \*\*\*150.00 Principal Place of Business Mailing Address KNA SHAYNEE HES SOUR REAL HEAVAGE HIS SHOW KE 96205-2526 HEXXXXXXXXXXXXXXX 6675 13TH AVE. N. ST PETERSBURG FL 33710 2. Principal Place of Business 3. Mailing Address PO Box 2946 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 44-0648448 Shawnee Mission, KS 66201-1346 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee:Required-6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ALLAN, DANIEL R. Street Address (P.O. Box Number is Not Acceptable) 6675 13TH AVENUE NORTH, 2D ST. PETERSBURG FL 33710 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME CASTOR, L'MITCHELL NAME STREET ADDRESS STREET ADDRESS 12760 GARNETT CITY-ST-ZIP CITY-ST-ZIP **OVERLAND PARK KS 66210** ☐ Change ☐ Addition TITLE TITLE COULSON, J. PHILIP NAME NAME STREET ADDRESS STREET ADDRESS 2221 DRURY LANE CITY-ST-ZIP SHAWNEE MISSION KS 66208 CITY-ST-ZIP TITLE TITLE ☐ Change Addition ☐ Delete NAME ALLAN, DANIEL R. NAME STREET ADDRESS 7352 HUNT CLUB LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP SEMINOLE FL 34646 DC /P ☐ Delete TITLE ☐ Change Addition TITLE WILKERSON, WILLIAM R.III NAME NAME STREET ADDRESS 3810 WEST 66 ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SHAWNEE MISSION KS 66208 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME GARRETT, DAVID NAME STREET ADDRESS STREET ADDRESS 9116 W 112 ST. CITY-ST-ZIP CITY-ST-ZIP **OVERLAND PARK KS 66210** D٧ Delete ☐ Change ☐ Addition TITLE FORD, GERALD L. STREET ADDRESS 24901 TIMBERLAKE TRAIL STREET ADDRESS GREENWOOD MO 64034 CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or st of the corporation or the rec ue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director erea to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachme

3/15/2001

(913) 432-4400

Daytime Phone #