

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006428

FILED
May 06, 2004
Secretary of State

Entity Name: DPRA INCORPORATED

Current Principal Place of Business:

200 RESEARCH DRIVE
MANHATTAN, KS 66503

New Principal Place of Business:

Current Mailing Address:

200 RESEARCH DRIVE
MANHATTAN, KS 66503

New Mailing Address:

FEI Number: 48-0786852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YONKEE, ERIC
3915 SADDLE RIDGE STREET
VALRICO, FL 33594 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: VD () Delete
Name: BARCLAY, MICHAEL M
Address: 806 UTTERBACK STONE RD
City-St-Zip: GREAT FALLS, VA 22066

Title: TS () Delete
Name: CARTER, MARY J
Address: 3004 AMHERST
City-St-Zip: MANHATTAN, KS 66503

Title: VD (X) Delete
Name: MONTRONE, ANTHONY
Address: 31 HEMLOCK CIRCLE
City-St-Zip: PRINCETON, NJ 08540

Title: VD () Delete
Name: HOMENUCK, PETER
Address: RR #1
City-St-Zip: SCHOMBERG, ON,

Title: D () Delete
Name: KIRK, JOSEPH
Address: PO BOX 96476
City-St-Zip: LAS VEGAS, NV 891936476

Title: D () Delete
Name: ARNOLD, DIANNE
Address: 5113 LAKE RIDGE ROAD, STE. 200
City-St-Zip: MINNEAPOLIS, MN 554361234

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TS (X) Change () Addition
Name: CARTER, MARY J
Address: 4200 CAITLIN DRIVE
City-St-Zip: MANHATTAN, KS 66502

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 Section 119.07(3)(i), 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: MARY J CARTER

TS

05/06/2004

Electronic Signature of Signing Officer or Director

_____ Date