2000 UNIFORM BUSINESS REPORT (UBR)

\mathtt{FILED} **DOCUMENT # 849527** Apr 26, 2000 8:00 am Secretary of State 1. Entity Name THE MARLEY COOLING TOWER COMPANY 04-26-2000 90058 010 ***150.00 Principal Place of Business Mailing Address 7401 W 129TH STREET 7401 W 129TH STREET OVERLAND PARK KS 66213 OVERLAND PARK KS 66213-2634 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 48-0920715 Not Applicable Zip Country Zip 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 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) DATE 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. President TITLE ☐ Delete TITLE Change ☐ Addition LANDON, R D J. M. Gibbs NAME NAME 10127 S SHADOW CIRCLE STREET ADDRESS STREET ADDRESS 7401 W. 129th Street CITY-ST-ZIP Overland Park, KS 66213 Vice President Finance (TXChange CITY-ST-ZIF **OLATHE KS 66061** ☐ Delete TITLE TITLE SCHALL, B L Michael R. Canipe NAME NAME 6411 BELINDER AVE STREET ADDRESS 7401 W. 129th Street STREET ADDRESS CITY-ST-ZIP SHAWNEE MISSION KS 66208 CITY-ST-ZIP Overland Park, KS 66213 ☐ Delete ☐ Change Addition TITLE TITLE HOUX, J.R., JR. NAME NAME STREET ADDRESS 6126 REINHARDT DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP FAIRWAY KS Change ☐ Addition ☐ Defete TITLE TITLE MCKINNEY, R P NAME NAME STREET ADDRESS STREET ADDRESS 4443 DARVENTRY CT ... CITY-ST-ZIP CITY-ST-ZIP CHARLOTTE NC 28226 Change ☐ Delete TITLE ☐ Addition KELLERMAN, PATRICK S NAME NAME STREET ADDRESS 12043 W 154TH TERR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **OVERLAND PARK KS 66221** ☐ Delete Change ☐ Addition TITLE GIBBS, J M NAME NAME STREET ADDRESS 4200 FOX BROOK LANE STREET ADDRESS CITY-ST-ZIP **CHARLOTTE NC 28211** 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 supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CICNIATURE

Patrick S. Kellerman

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-00 (913)664-7400