

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morinam  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

95 JAN 25 PM 2:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **F93000003067 (6)**

1. Corporation Name

**SERVICE DATA CORPORATION**

DO NOT WRITE IN THIS SPACE.

Principal Place of Business: 2424 SOUTH 130TH CIRCLE, OMAHA NE 68144  
Mailing Address: 2424 SOUTH 130TH CIRCLE, OMAHA NE 68144

3. Date incorporated or Qualified: **06/25/1993**  
3a. Date of Last Report: **02/09/1994**

2. Principal Place of Business

2a. Mailing Address

4. FEI Number: **47-0720261**

Applied For:  Not Applicable

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

22. City & State

27. City & State

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

23. Zip Country

28. Zip Country

8. This corporation has liability for intangible tax under S. 190.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	C
NAME	MASTERSON, ROBERT E
STREET ADDRESS	2424 SOUTH 130TH CIRCLE
CITY - ST - ZIP	OMAHA NE 68144
TITLE	VC
NAME	ESPING, PERRY E
STREET ADDRESS	2424 SOUTH 130TH CIRCLE
CITY - ST - ZIP	OMAHA NE 68144
TITLE	P
NAME	HOLZAPFEL, ANTON J
STREET ADDRESS	2424 SOUTH 130TH CIRCLE
CITY - ST - ZIP	OMAHA NE 68144
TITLE	V
NAME	DASENBROCK, THOMAS
STREET ADDRESS	2424 SOUTH 130TH CIRCLE
CITY - ST - ZIP	OMAHA NE 68144
TITLE	V
NAME	ANDERSON, RICHARD D
STREET ADDRESS	2424 SOUTH 130TH CIRCLE
CITY - ST - ZIP	OMAHA NE
TITLE	VS
NAME	LUNDGREN, DENNIS H
STREET ADDRESS	2424 SOUTH 130TH CIRCLE
CITY - ST - ZIP	OMAHA NE

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trustee or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, as appropriate, or in an attachment with an address.

SIGNATURE:

*Dennis H. Lundgren V.P.*  
DENNIS H. LUNDGREN, VICE PRESIDENT, SERVICE DATA CORPORATION

1/10/95

(402) 330-8660

PRINT NAME AND TYPE OR SIGNATURE OF SIGNING OFFICER OR DIRECTOR (Date) (Typed Name)