

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR -7 AM 10:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****200.00 ****200.00

DO NOT WRITE IN THIS SPACE.

DOCUMENT # F94000001409 (1)

1. Corporation Name

QUEST COMMUNICATIONS CORPORATION OF KANSAS

Principal Place of Business

8829 BOND ST.
OVERLAND PARK KS 66214

Mailing Address

8829 BOND ST.
OVERLAND PARK KS 66214

3. Date Incorporated or Qualified

03/21/1994

3a. Date of Last Report

4. FEI Number

48-1142338

Applied For

APPLIED FOR

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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 mandating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	CINELLI, ALBERT E
STREET ADDRESS	8829 BOND ST.
CITY - ST - ZIP	OVERLAND PARK KS 66214
TITLE	VD
NAME	GREENBANK, JOHN C
STREET ADDRESS	8829 BOND ST.
CITY - ST - ZIP	OVERLAND PARK KS 66214
TITLE	VD
NAME	CINELLI, JOHN P
STREET ADDRESS	8829 BOND ST.
CITY - ST - ZIP	OVERLAND PARK KS 66214
TITLE	VT
NAME	SHEARER, THOMAS W
STREET ADDRESS	8829 BOND ST.
CITY - ST - ZIP	OVERLAND PARK KS 66214
TITLE	S
NAME	MOORE, ALBERT W JR
STREET ADDRESS	8829 BOND ST.
CITY - ST - ZIP	OVERLAND PARK KS 66214
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	Chairman of the Board	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	President, Director	☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	Treas., V.P., Director	☒ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Director	☐ Change ☒ Addition
6.2 NAME	Gloria Lietzke	
6.3 STREET ADDRESS	8829 Bond St.,	
6.4 CITY - ST - ZIP	Overland Park, KS 66214	

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 its receiver 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 of this report, or on an attachment with an address.

SIGNATURE:

Thomas W. Shearer

Thomas W. Shearer

February 27, 1995 (913)492-1230

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date (Typed Name #)