

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000004877

1. Entity Name

FEDERATED RURAL ELECTRIC MANAGEMENT CORP.

FILED

00 SEP 26 AM 10:28

Principal Place of Business

11875 WEST 85TH STREET
LENEXA KS 66214

Mailing Address

11875 WEST 85TH STREET
LENEXA KS 66214

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

48-1219966

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 \$61.25
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: D Delete
NAME: ADAIR, CHARLES E
STREET ADDRESS: 185 PIN OAK LANE
CITY-ST-ZIP: CLINTON SC 29325

TITLE: Officer - V.P. Finance/CFO Change Addition
NAME: Irwin, Philip D.
STREET ADDRESS: 11875 W. 85th St.
CITY-ST-ZIP: Lenexa, KS 66214

TITLE: D Delete
NAME: BASON, JIMMY R
STREET ADDRESS: STAR ROUTE 2, BOX 88
CITY-ST-ZIP: HILLSBORO NM 88042

TITLE: Change Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: C Delete
NAME: BEADLES, WAYNE
STREET ADDRESS: ROUTE 1, BOX 235
CITY-ST-ZIP: BRINKLEY AR 72021

TITLE: Change Addition
NAME: 000003419770-7
STREET ADDRESS: -10/09/00--01105--012
CITY-ST-ZIP: *****61.25 *****61.25

TITLE: ST Delete
NAME: CAMPBELL, DONALD A
STREET ADDRESS: 120 EAST AGATE AVE.
CITY-ST-ZIP: GRANBY CO 80446

TITLE: Change Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: D Delete
NAME: COYLE, DAVID J
STREET ADDRESS: 58470 HWY. 371
CITY-ST-ZIP: ANZA CA 92539

TITLE: Change Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: D Delete
NAME: FANNING, JAMES R
STREET ADDRESS: 21 W. 160 HWY.
CITY-ST-ZIP: LAMAR MO 64759

TITLE: Change Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: Philip D. Irwin 09/21/00 (913) 541-0150
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #