FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 APR -1 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000006036

1. Corporation Name

Kirkpatrick, Pettis, Smith, Polian Inc.

Principal Place of Business	Mailing Address
10250 Regency Cir	10250 Regency Circle
Suite 400	Suite 400
Omaha, NE 68114	Omaha, NE 68114

DO NOT WRITE IN THIS SPACE

3. Date Incorporated For Qualified: 10/17/95

4. FEI Number: 47-0301070 [ ] Applied For [ ] N/A

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 Will Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax [ ] Yes [ ] No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip / Country 24 / 25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

The Prentice-Hall Corporation System, Inc.
1201 Hays Street - Suite 105
Tallahassee, FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is N/A 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 (Must be Registered Agent for Profit Corporations) DATE

12. OFFICERS AND DIRECTORS

TITLE	V	XX DELETE
NAME	Kelly, John III	
STREET ADDRESS	310 S. 55th Street	
CITY-ST-ZIP	Omaha, NE	
TITLE	V	XX DELETE
NAME	Clark, Cheryl	
STREET ADDRESS	1432 N. 131st Ave Cir	
CITY-ST-ZIP	Omaha, NE 68154	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS, P. 12

11 TITLE	Brian P. McGinty	[ ] Change [X] Add
12 NAME	Secretary / VP	
13 STREET ADDRESS	17075 Weir Street	
14 CITY-ST-ZIP	Omaha, NE 68185	
21 TITLE	Exec. VP	[ ] Change [X] Add
22 NAME	Doyle, Samuel	
23 STREET ADDRESS	10024 S. Spruce Mtn. Road	
24 CITY-ST-ZIP	Larkspur, CO 80118	
31 TITLE		[ ] Change [ ] Add
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		[ ] Change [ ] Add
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		[ ] Change [ ] Add
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		[ ] Change [ ] Add
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

CR2E034 (11/99)

-04/09/99--01091--006
****150.00 ****150.00

150 4/1/99

14. 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 annual 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 12 or Block 13 if changed, or on an attachment with this address, with all other like empowered.

SIGNATURE: Brian P. McGinty 3/30/99 402-397-5777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME TELEPHONE NUMBER

Brian P. McGinty