

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23200

Entity Name: SEGA, INC. OF KANSAS

Current Principal Place of Business:

16041 FOSTER
OVERLAND PARK, KS 66085-1000

Current Mailing Address:

PO BOX 1000
OVERLAND PARK, KS 66085-1000 US

FEI Number: 43-0981939

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title VD
Name KRAATZ, KEVIN R
Address 23005 WEST 207TH
City-State-Zip: SPRINGHILL KS

Title CFOT
Name KEEGAN, CYNTHIA L
Address 3370 W 194TH ST
City-State-Zip: STILWELL KS 66085

Title VD
Name WERTHMAN, JOHN P
Address 1253 SW CROSSING STREET
City-State-Zip: LEE'S SUMMIT MO 64081

Title PRESIDENT
Name JACOBS, DEREK T
Address 13163 KESSLER
City-State-Zip: OVERLAND PARK KS 66213

Title CEO
Name BROWN JR, JOHN W
Address 4515-1 ROANOKE PARKWAY
City-State-Zip: KANSAS CITY MO 64111

Title VP
Name HINDERLITER, STEVEN D
Address 13413 WEST 128TH STREET
City-State-Zip: OVERLAND PARK KS 66213

Title VP
Name ROGERS, CHRIS R
Address 5452 WEST 153RD STREET
City-State-Zip: LEAWOOD KS 66224

Title SECRETARY
Name DENNIS, JUDITH A
Address 15913 MARTY LANE
City-State-Zip: STILWELL KS 66085

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CYNTHIA L. KEEGAN

CFO/TREASURER

03/10/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST. SECRETARY
Name WEBER, KATHRYN J
Address 20701 WEST 72ND TERRACE
City-State-Zip: SHAWNEE KS 66218

Title VP
Name ANDERSON, TOR C
Address 5609 W. 151ST TERRACE
City-State-Zip: OVERLAND PARK KS 66223

Title VP
Name DOMANN, TODD A
Address 133 SHORELINE TERRACE
City-State-Zip: LOUISBURG KS 66053