## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## 439371 DOCUMENT #

1. Entity Name

LOPATKA, MURDOCK, JAMMAL & ASSOCIATES, A TRANSYS TEMS CORPORATION



Principal Place of Business Mailing Address 2400 PERSHING ROAD ATTN: J. KAHMANN SUITE 400 2400 PERSHING ROAD, SUITE 400 KANSAS CITY MO 64108 KANSAS CITY MO 64108 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State 4. FEI Number City & State Applied For 59-1488944 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name \_ والمنجلة المنافعة C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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. I am familiar with, and accept the obligations of registered agent. 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 \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Addition Change 1 LARSON, BRIAN G NAME NAME STREET ADDRESS 2400 PERSHING RD., STE. 400 STREET ADDRESS KANSAS CITY MO 64108 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition MAPLES, MICHAEL L NAME NAME STREET ADDRESS 2400 PERSHING RD., STE. 400 STREET ADDRESS CITY-ST-ZIE KANSAS CITY MO 64108 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition Murdock, Robert NAME NAME 1347 PALMETTO AVE., STE, 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Winter Park FL 32789 CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition JAMMAL, EMILE NAME NAME STREET ADDRESS 1347 PALMETTO AVE., STE, 200 STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32789 CITY-ST-ZIP TITLE Delete TITLE Change Addition MARTIN, JIM NAME NAME STREET ADDRESS 2400 PERSHING RD., STE. 400 STREET ADDRESS CITY-ST-7IP KANSAS CITY MO 64108 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**FILED** 

Jan 16, 2003 8:00 am Secretary of State

01-16-2003 90073 011 \*\*\*158.75

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