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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 856230

(8)

UNITED TOTE COMPANY

## FILED Apr 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							
2718 MONTANA AVENUE		2718 MONTANA AVENUE					
SUITE 200 BILLINGS MT 59101		SUITE 200 BILLINGS MT 59101			DO NOT WRITE IN THIS SPACE		
US US	39101	DIS MI DAID!			3. Date Incorporated or Qualified		
		•			04/25/1983		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	IA]	oplied For
21 2311	2311 S. 7th Avenue 26 2311 S. 7t			e	81-0365105	No	ot Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5, Certificate of Status Desired	\$8.75	Additional
22	27			6. Certificate di Status Desired	Fee Re	equired	
City & State	)	City & State			6. Election Campaign Financing	\$5.00	May Be
23 Bozen	man, MT 28 Bozeman, MT			Trust Fund Contribution Added to Fees			to Fees
Zip	Country	Zip	Countr	-	This corporation owes or has paid the corporation of the corporation owes or has paid the corporation.		tangible
24 59715	1=-1		30 U	SA	Personal Property Tax due June 30.	73	No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registers	d Agent	
CT CORPORATION SYSTEM *				Name	*Registered Agent change	ln proce	
1200 S. PINE ISLAND ROAD				Street	Address (P.O. Box Number is Not Acceptable)	in proce	
PLANTATION FL 33324				1			
			83	1	· · · · · · · · · · · · · · · · · · ·		
			84	City		. <b>85</b> Zip	Code
			J"	'I City	F	L S P	Code
11. Pursuani t	o the provisions of Sections 607,0502	and 607.1508, Florida Statute	s, the abov	e-named	corporation submits this statement for the purpose	of changing i	ts registered
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 the if applicable (NOTE	Registered Ac	ent signature	required when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	
TITLE	VSD	XX DELETE	1.1 TITLE		TD	Change	X Addition
NAME	KINNARD, DAVID B		1.2 NAME		Susan J. Carstensen		
STREET ADDRESS	2718 MONTANA AVENUE, SUT	TE 200	1.3 STREE	T ADDRESS	2311 S. 7th Avenue		
CITY-ST-7IP	BILLINGS MT		1.4 C/TY-	ST - ZiP	Bozeman, MT 59715		
TETLE	DC	☐ DELETE	21 TITLE			K Change	Addition
NAME	HADDRILL, RICHARD M		2.2 NAME				
STREET ADDRESS	2718 MONTANA AVENUE, SUI	TE 200	2.3 STREE	T ADDRESS	2311 S. 7th Avenue		
CITY-ST-ZIP	BILLINGS MT		2. 4 CiTY-	ST - ZIP	Bozeman, MT 59715		
TITLE	VD	XX DELETE	3.1 TITLE	•	AS	☐ Change	Addition
NAME	amundson, gary		3.2 NAME		Janet M. Bjork		
STREET ADDRESS	2718 MONTANA AVENUE, SUI	200	3.3 STREE	T ADDRESS	2311 S. 7th Avenue		
CITY-ST-ZIP	BILLINGS MT		3.4 CITY		Bozeman, MT 59715		
TITLE	-V	XX DELETE	4.1 TITLE		V	☐ Change	Addition
NAME	BAKER, JAMES P		4. 2 NAMI	E	Don Fuller		
STREET ADDRESS	2718 MONTANA AVE, SUI 200			T ADDRESS	9515 Deereco Road, Suite 2	200	
CATY-ST-ZAP	BILLINGS MT		4.4 CITY-		Timonium, MD 21093-2153		
TITLE		DELETE	5.1 TITLE		11mon11mi, PD 21043-2133	K Change	Addition
NAME	METSCHULAT, FRED	_	5.2 NAME			•	
STREET ADORESS	2718 MONTANA AVENUE, SUI	TE 200			8515 Deereco Rd., Suite 200	)	
CITY-S1-ZIP	BILLINGS MT		5.4 CITY-		Timonium, MD 21093-2153		ļ
TITLE			6.1 TITLE	VI - E#		Change	Addition
NAME	DAVISON, JEFFREY C	*****	6.2 NAME		AD	43	
STREET ADORESS	2718 MONTANA AVENUE, SUI	200		T ADDRESS	2213 6 745 4		
1	BILLINGS MT				2311 S. 7th Avenue		į
CITY-SI-ZIP	SELECTOR INT		6.4 CITY-	ST-ZIP	Bozeman, MT 59715		

4. Thereby 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 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 the recover 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 the properties of the corporation of the corporati

SIGNATURE:

Assistant Secretary

4/9/98

(406) 585-6600