

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90694 034 ***150.00

DOCUMENT # F00000004578

1. Entity Name
WHEATFIELD INVESTMENTS, INC.



Principal Place of Business
**22234 "C" ST. - STROTHER FIELD
WINFIELD KS 67156**

Mailing Address
**22234 "C" ST. - STROTHER FIELD
WINFIELD KS 67156**

30001417



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **43-1853547**

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

**REGISTERED AGENTS LEGAL SERVICES,LLC
1333 NORTH DUVAL STREET
TALLAHASSEE FL 32302**

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. 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

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **HANSEN, MARY JO**
STREET ADDRESS **1542 QUAIL COURT**
CITY-ST-ZIP **DERBY KS 67037**

TITLE ☐ Change ☒ Addition
NAME **T. Michael Dougherty**
STREET ADDRESS **6007 E. Kelton Lane**
CITY-ST-ZIP **Scottsdale, AZ 85254**

TITLE **VP** ☐ Delete
NAME **HANSEN, E. GUNTER**
STREET ADDRESS **1542 QUAIL COURT**
CITY-ST-ZIP **DERBY KS 67037**

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

TITLE **S** ☐ Delete
NAME **LAWRENCE, TERRY**
STREET ADDRESS **2585 162ND RD**
CITY-ST-ZIP **OXFORD KS 67119**

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

TITLE **D** ☐ Delete
NAME **BOYLE, JOHN**
STREET ADDRESS **502 QUAIL NEST RD**
CITY-ST-ZIP **WINFIELD KS 67156**

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

TITLE **D** ☐ Delete
NAME **SCHAEFFER, BOB**
STREET ADDRESS **PO BOX 220**
CITY-ST-ZIP **COLETA CA 93116**

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

TITLE **D** ☐ Delete
NAME **WILLIAMS, JOHN**
STREET ADDRESS **PO BOX 151**
CITY-ST-ZIP **MONTICELLO IA 52310**

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 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:

E. Gunter Hansen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-03

620-221-9037

Date

Daytime Phone #

CR2E034 (10/02)