

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2002 8:00 am
Secretary of State

07-16-2002 90358 005 ****61.25

DOCUMENT # F00000005380

1. Entity Name

THE AMERICAN TAXPAYERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**10306 REGENCY PKWY DR
 OMAHA NE 68114**

**10306 REGENCY PKWY DR
 OMAHA NE 68114**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

47-0833849

Applied For

Not Applicable

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

**LEXIS DOCUMENT SERVICES INC.
 3953 W.W. KELLEY ROAD
 TALLAHASSEE FL 32311**

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

**After September 13, 2002,
 min. will be \$236.25.**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Delete
 NAME **WALKER, DANIEL V**
 STREET ADDRESS **1160 NORTH DUTTON AVENUE STE 200**
 CITY-ST-ZIP **SANTA ROSA CA 95401**

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

TITLE **DVST** ☒ Delete
 NAME **LOPEZ, MICHAEL D**
 STREET ADDRESS **1160 NORTH DUTTON AVENUE STE 200**
 CITY-ST-ZIP **SANTA ROSA CA 95401**

TITLE **VSD** ☐ Change ☒ Addition
 NAME **Thomas Barrett**
 STREET ADDRESS **10306 Regency Parkway Drive**
 CITY-ST-ZIP **Omaha, Nebraska 68114**

TITLE **D** ☒ Delete
 NAME **TRUDE, THOMAS**
 STREET ADDRESS **1160 NORTH DUTTON AVENUE STE 200**
 CITY-ST-ZIP **SANTA ROSA CA 95401**

TITLE **D** ☐ Change ☒ Addition
 NAME **Mary Barrett**
 STREET ADDRESS **10306 Regency Parkway Drive**
 CITY-ST-ZIP **Omaha, Nebraska 68114**

TITLE **D** ☒ Delete
 NAME **HAKEL, THOMAS A**
 STREET ADDRESS **1160 NORTH DUTTON AVENUE STE 200**
 CITY-ST-ZIP **SANTA ROSA CA 95401**

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

TITLE **D** ☐ Delete
 NAME **BARRETT, FRANK J**
 STREET ADDRESS **10306 REGENCY PARKWAY DRIVE**
 CITY-ST-ZIP **OMAHA NE 68114**

TITLE **PTD** ☒ Change ☐ Addition
 NAME **Barrett, Frank J.**
 STREET ADDRESS **10306 Regency Parkway Drive**
 CITY-ST-ZIP **Omaha, Nebraska 68114**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 617, 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:

Frank J. Barrett

7-11-02 407 3977300

CR2E037 (4/02)