

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

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90847 034 ***158.75

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1. Entity Name

HOMEPRIDE INSURANCE AGENCY, INC.



Principal Place of Business

10801 MASTIN DRIVE, SUITE 500
OVERLAND PARK KS 66210

Mailing Address

10801 MASTIN DRIVE, SUITE 500
OVERLAND PARK KS 66210

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

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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 DVS ☐ Delete
NAME COLLINS, JOHN J JR
STREET ADDRESS 2701 CAMBRIDGE CT., SUITE 300
CITY-ST-ZIP AUBURN HILLS MI 48326

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

TITLE EVP ☐ Delete
NAME SERGI, BEN
STREET ADDRESS 10801 MASTIN DRIVE, SUITE 500
CITY-ST-ZIP OVERLAND PARK KS 66210

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

TITLE VPT ☒ Delete
NAME CLEBERG, ANTHONY S
STREET ADDRESS 2701 CAMBRIDGE CT., SUITE 300
CITY-ST-ZIP AUBURN HILLS MI 48326

TITLE VPT ☐ Change ☒ Addition
NAME Phyllis A. Knight
STREET ADDRESS 2701 Cambridge Ct., Ste.300
CITY-ST-ZIP Auburn Hills, MI. 48326

TITLE P ☐ Delete
NAME RAJPUT, ABDUL
STREET ADDRESS 10801 MASTIN DRIVE, SUITE 500
CITY-ST-ZIP OVERLAND PARK KS 66210

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 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:

Abdul H. Rajput
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Abdul H. Rajput

2/27/03

913-491-6061

Date

Daytime Phone #

CR2E034 (10/02)