2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 22, 2003 8:00 am
Secretary of State
01-22-2003 90157 013 ****61.25

DOCUMENT # F02000004738

1. Entity Name
ROCKHURST UNIVERSITY CONTINUING EDUCATION CENTER , INC.

Principal Place of Business	Mailing Address
6901 WEST 63RD STREET OVERLAND PARK KS 66202	6901 WEST 63RD STREET OVERLAND PARK KS 66202

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 43-1576558 — ☐ 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
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	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 $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	KINERK, EDWARD FR., SJ	NAME	
STREET ADDRESS	6901 WEST 63RD STREET	STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS 66202	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	WEINBERG, GARY	NAME	
STREET ADDRESS	6901 WEST 63RD STREET	STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS 66202	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	LONG, ROBERT	NAME	
STREET ADDRESS	6901 WEST 63RD STREET	STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS 66202	CITY-ST-ZIP	
TITLE	SD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	VAN DYKE, MICHAEL	NAME	
STREET ADDRESS	6901 WEST 63RD STREET	STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS 66202	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	FRIGON, HANK	NAME	
STREET ADDRESS	6901 WEST 63RD STREET	STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS 66202	CITY-ST-ZIP	
TITLE	D ☒ Delete	TITLE	V. P. FINANCE ☐ Change ☒ Addition
NAME	RICHARDSON, AUBREY	NAME	DAVID GULSETH
STREET ADDRESS	6901 WEST 63RD STREET	STREET ADDRESS	6901 W. 63RD ST.
CITY-ST-ZIP	OVERLAND PARK KS 66202	CITY-ST-ZIP	OVERLAND PARK KS 66202

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: SIGNATURE REQUIRED 1-7-2003 913-432-7255

CR2E037 (10/02)