2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001624

Entity Name: DATAPROSE, INC.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1451 NORTH RICE AVE **OXNARD, CA 93030 Current Mailing Address: New Mailing Address:** 2525 N 117 AVE OMAHA, NE 68164 FEI Number: 77-0247518 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition CARTER, GLENN KALAN, PETER Name: Name: 1451 NORTH RICE AVE 9555 MAROON CIRCLE Address: Address: City-St-Zip: OXNARD, CA 93030 City-St-Zip: ENGLEWOOD, CO 80112 Title: SD Title: () Delete (X) Change () Addition Name: ORFALEA, PAUL Name: RUBLE, JOSEPH T 2151 ALESSANDRO DRIVE 9555 MAROON CIRCLE Address: Address: VENTURA, CA 93001 City-St-Zip: City-St-Zip: ENGLEWOOD, CO 80112 Title: Title: (X) Change () Addition () Delete CFO FLEET, FRED CFO WIESE, RANDY Name: Name: 1451 NORTH RICE AVE 2525 N 117TH AVENUE Address: Address: City-St-Zip: OXNARD, CA 93030 City-St-Zip: OMAHA, NE 68164 Title: () Delete Title: (X) Change () Addition PRESTEGARD, ALLEN COSTELLO, PATRICK F Name: Name: Address: 502 PACIFIC DR Address: 2525 N. 117TH AVENUE City-St-Zip: LAHAINA, HI 96761 City-St-Zip: OMAHA, NE 68164 Title: Title: () Delete AS () Change (X) Addition KRUGER, BRUCE E Name: Name: Address: 2525 N. 117TH AVENUE Address: City-St-Zip: City-St-Zip: OMAHA, NE 68164 Title: () Delete Title: () Change (X) Addition BARRY, DAMON O Name: Name: 9555 MAROON CIRCLE Address: Address: City-St-Zip: City-St-Zip: ENGLEWOOD, CO 80112

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE KRUGER AS 04/14/2009