

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90246 020 ***150.00

DOCUMENT # F19354

1. Entity Name

PERRY PROTECTION SERVICES, INC.

Principal Place of Business

**6500 SPRINT PKWY
MAILSTOP: HL-5ASTX
OVERLAND PARK KS 66251-5777
US**

Mailing Address

**6500 SPRINT PKWY
MAILSTOP: HL-5ASTX
OVERLAND PARK KS 66251-5777
US**

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

59-2099748

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **JENSEN, DON A**
STREET ADDRESS **2330 SHAWNEE MISSION PKWY**
CITY-ST-ZIP **WESTWOOD KS 66205**

TITLE **V** ☐ Delete
NAME **HYDE, MICHAEL T**
STREET ADDRESS **2330 SHAWNEE MISSION PKWY**
CITY-ST-ZIP **WESTWOOD KS 66205**

TITLE **T** ☒ Delete
NAME **STRANDJORD, M J**
STREET ADDRESS **6180 SPRINT PKWY**
CITY-ST-ZIP **OVERLAND PARK KS 66251**

TITLE **AS** ☐ Delete
NAME **LOVE, CAROLYN S**
STREET ADDRESS **2330 SHAWNEE MISSION PKWY**
CITY-ST-ZIP **WESTWOOD KS 66205**

TITLE **S** ☐ Delete
NAME **DOHERTY, DANIEL E**
STREET ADDRESS **2330 SHAWNEE MISSION PARKWAY**
CITY-ST-ZIP **WESTWOOD KS 66205**

TITLE **AVP** ☐ Delete
NAME **BESHRARS, MARK V**
STREET ADDRESS **6180 SPRING PKWY**
CITY-ST-ZIP **OVERLAND PARK KS 66251-5777**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT / DIRECTOR** ☐ Change ☒ Addition
NAME **THOMAS A. GERKE**
STREET ADDRESS **6200 SPRINT PARKWAY**
CITY-ST-ZIP **OVERLAND PARK, KS 66251**

TITLE ☒ Change ☐ Addition
NAME **6200 SPRINT PKWY**
STREET ADDRESS **OVERLAND PARK, KS 66251**

TITLE **TREASURER** ☐ Change ☒ Addition
NAME **GENE M. BETTS**
STREET ADDRESS **6200 SPRINT PKWY**
CITY-ST-ZIP **OVERLAND PARK, KS 66251**

TITLE ☐ Change ☐ Addition
NAME **6200 SPRINT PARKWAY**
STREET ADDRESS **OVERLAND PARK, KS 66251**

TITLE ☒ Change ☐ Addition
NAME **6200 SPRINT PARKWAY**
STREET ADDRESS **OVERLAND PARK, KS 66251**

TITLE ☒ Change ☐ Addition
NAME **6500 SPRINT PARKWAY**
STREET ADDRESS **OVERLAND PARK, KS 66251**

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
Signature and Typed or Printed Name of Signing Officer or Director

4-22-02
Date

913-315-5820
Daytime Phone #

CR2E034 (9/01)