

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000003513 (9)

1. Corporation Name

RETAIL PLANS AND MANAGEMENT, INC.

**APPROVED
AND
FILED**

95 APR 27 AM 7:46

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

**2501 MCGEE, MAIL DROP 339
KANSAS CITY MO 64108**

Mailing Address

**ATTN. TAX 407
P O BOX 419479
KANSAS CITY MO 64141
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/30/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

43-1039549

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

7. This corporation has liability for intangible tax under C. 100.002,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

23

Zip

Country

24

City & State

27

Zip

Country

30

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and (if applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CD
NAME	FIRNHABER, ROBERT D
STREET ADDRESS	3521 WEST 87TH STREET
CITY - ST - ZIP	LEAWOOD KS
TITLE	PD
NAME	STURGEON, ROD
STREET ADDRESS	16950 206TH STREET
CITY - ST - ZIP	TONGANOXIE KS 66086
TITLE	VP
NAME	EGAN, CHARLES J JR.
STREET ADDRESS	712 EAST 47TH STREET
CITY - ST - ZIP	KANSAS CITY MO 64110
TITLE	VPAS
NAME	CLEMENTS, VERNON D
STREET ADDRESS	9610 WEST 131ST ST.
CITY - ST - ZIP	OVERLAND PARK KS 66213
TITLE	VPAS
NAME	SCHAEFER, MARK
STREET ADDRESS	12004 WINDSOR
CITY - ST - ZIP	LEAWOOD KS 66209
TITLE	S
NAME	YOUNG, VICKIE
STREET ADDRESS	11707 EAST 81ST STREET
CITY - ST - ZIP	KANSAS CITY MO 64133

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	See attached list of officers and directors
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	
5.2 NAME	5050 Sunset Dr. Kansas City, MO 64112
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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; the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

Vernon D. Clements, Vice President 4-20-95

816-274-8691

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Cert # E206438524

FA300000 2513

RETAIL PLANS AND MANAGEMENT, INC.
2501 McCas Trafficway
Kansas City, MO 64108
1995
Officers and Directors

OFFICERS

Robert D. Firnhaber

Rod Sturgeon

Charles J. Egan, Jr.

Vernon D. Clements

Mark Schaefer

Vickie Young

E. Bruce McKinney

Robert C. Benson

Judith Whittaker

OFFICE

Chairman of the Board

President

Vice President

Vice President, Asst. Sec.

Vice President, Asst. Sec.

Secretary

Treasurer

Tax Officer

Assistant Secretary

RESIDENCE ADDRESS

3521 West 87th Street
Leawood, KS 66206

16950 206th Street
Tonganoxie, KS 66086

712 East 47th Street
Kansas City, MO 64110

9810 West 131st Street
Overland Park, KS 66213

5050 Sunset Dr.
Kansas City, MO 64112

11707 East 61st Street
Kansas City, MO 64133

10423 W. 126th Street
Overland Park, KS 66213

8108 Northwest Overland Drive
Kansas City, MO 64151

5900 Mission Drive
Mission Hills, KS 66208

DIRECTORS

Robert D. Firnhaber

Rod Sturgeon

Chairman of the Board

President

3521 West 87th Street
Leawood, KS 66206

16950 206th Street
Tonganoxie, KS 66086