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FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F94000000478 (7)

1. Corporation Name
THE PROVO GROUP, INC.

Principal Place of Business

101 WEST 11TH STREET
SUITE 1110
KANSAS CITY MO 64105
US

Mailing Address

101 WEST 11TH STREET
SUITE 1110
KANSAS CITY MO 64105
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/31/1994

4. FEI Number

36-3359416

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

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 607.1508, 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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME PROVO, BRUCE A
STREET ADDRESS 8812 LINDEN DRIVE
CITY-ST-ZIP PRAIRIE VILLAGE KS 66207 ☐ DELETE

TITLE D
NAME RICH, MARTIN D
STREET ADDRESS 1705 SECOND AVENUE SUITE 409
CITY-ST-ZIP ROCK ISLAND IL 61201 ☐ DELETE

TITLE DV
NAME GOLDING, JAMES L
STREET ADDRESS 999 N. LAKESHORE DRIVE
CITY-ST-ZIP CHICAGO IL 60611 ☐ DELETE

TITLE S
NAME STKINSON, KRISTIN J
STREET ADDRESS 5636 MEADOW COURT
CITY-ST-ZIP PARKVILLE MO ☒ DELETE

TITLE VT
NAME ATKINSON, KRISTIN J
STREET ADDRESS 5636 MEADOW COURT NORTH
CITY-ST-ZIP PARKVILLE MO 64152 ☐ DELETE

TITLE S
NAME SAUNDERS, MAUREEN M
STREET ADDRESS 210 BORDER DR. N.E.
CITY-ST-ZIP LEES SUMMIT MO 64088 ☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

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

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

VS

Atkinson, Kristin J.
5636 Meadow Court North
Parkville, MO 64152

T

Wallace R. Wilkerson
406 East 10th Street
Keavney, MO 64060

14. 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 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Kristin J. Atkinson

4/3/98

(816) 421-7444

CR2E034 (10/97)