

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F94000001409 (1)

1. Corporation Name

QCC, INC. OF KANSAS

Principal Place of Business

8829 BOND ST.
OVERLAND PARK KS 66214

Mailing Address

8829 BOND ST.
OVERLAND PARK KS 66214

APPROVED
AND
FILED

55 MAR 18 PM 5:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

3. Date Incorporated or Qualified

03/21/1994

3a. Date of Last Report

03/07/1995

4. FEI Number

48-1142338

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name **NRAI SERVICES, INC.**
82 Street Address (P.O. Box Number is Not Acceptable)
526 EAST PARK AVENUE
83
84 City **TALLAHASSEE**

FL 85 Zip Code **32301**
RA CHANGED 12/18/95

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.

12/18/95 Change of agent effected by form CR2E045

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

☐ DELETE

TITLE **C**
NAME **CINELLI, ALBERT E**
STREET ADDRESS **8829 BOND ST.**
CITY-ST-ZIP **OVERLAND PARK KS 66214**

☐ DELETE

TITLE **VD**
NAME **GREENBANK, JOHN C**
STREET ADDRESS **8829 BOND ST.**
CITY-ST-ZIP **OVERLAND PARK KS 66214**

☐ DELETE

TITLE **PD**
NAME **CINELLI, JOHN P**
STREET ADDRESS **8829 BOND ST.**
CITY-ST-ZIP **OVERLAND PARK KS 66214**

☐ DELETE

TITLE **TVD**
NAME **SHEARER, THOMAS W**
STREET ADDRESS **8829 BOND ST.**
CITY-ST-ZIP **OVERLAND PARK KS 66214**

☐ DELETE

TITLE **S**
NAME **MOORE, ALBERT W JR**
STREET ADDRESS **8829 BOND ST.**
CITY-ST-ZIP **OVERLAND PARK KS 66214**

☐ DELETE

TITLE **D**
NAME **LIETZKE, GLORIA**
STREET ADDRESS **8829 BOND ST.**
CITY-ST-ZIP **OVERLAND PARK KS 66214**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

200001747262
-03/18/96--01080--002
******200.00 ****200.00**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

12/18/96

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 119.07(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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas W. Shearer

(913) 492-1230

Date

Day/Time Phone #

CR2E034 (12/95)