FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Morthum

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400001409 (1)

QCC, INC. OF KANSAS

appears in Block 12 or

Principal Place of Business Mailing Address							1 COUNTY SELECTION OF S	J 58 111 49 111 88 111	BONE BOSES HER BIRN	80110 2021 1001	
8829 BOND ST. OVERLAND PARK KS 66214				8829 BOND ST. Overland Park KS 66214-1707							
							3. Date Incorporated	or Qualified	3a. Date of La		
2. Principal Place of Business 2a				a Address			03/21/1994		<u> 03/18/199</u>		
21 Philiopa	II FIACE OI BUSII	1085	 	2a. Mailing Address			4. FEI Number			Applied For	
	pt. #, etc.	<u></u>		Suite, Apt. #, etc.			48-1142338		\$8.7	Not Applicable 5 Additional	
22	· 		27	27			Certificate of Status	3 Desired	1 1 7	Required	
City & State			— ·	City & State			6. Election Campaign	_	\$5.	00 Мау Ве	
Zip Country			28	Zip Country			Trust Fund Contribu			ed to Fees	
24	25		<u>├</u>	29 30		y	This corporation ha Florida Statutes		ntangible tax und∈ Yes 😾 No	er s. 199.032.	
<u> </u>		t Registered		30]			Name and Address of New Registered Agent				
NRAI SERVICES, INC.										· · · · · · · · · · · · · · · · · · ·	
528 E. PARK AVE.					82	Street 4	Address (P.O. Box Number is I	Not Accontab	lo)		
TALLAHASSEE FL 32301							TOWNESS (F.O. DOX 140/1DG) 13 1	401 Acceptabl	······································		
		•			83	1					
		·			84	City			FL 85	ip Code	
11. Pursua	nt to the provisi	ions of Sections 607.050	2 and 607,150	8. Florida Statute	es the abov	e-named i	corporation submits this staten	ment for the n	reces of changir	on its registered	
OTTICE C	or registered ag	ent, or both, in the State th, and accept the obliga	of Florida, Suc	ch change was a	uthorized b	y the corp	oration's board of directors.	hereby accep	t the appointment	as registered	
_		in, and accept the obligi	anons on occur	on 607,0303, 110	iida Siaidie	ъ.				į	
SIGNATURE Signature, typed or printed name of registered agent and tale if applicable (NOTE: Registered Agent signature re-									DATE		
12.	T &	OFFICERS ANI	D DIRECTORS	Driege	13.		ADDITIONS/CHANG	ES TO OFFICI			
TITLE NAME	CINELL	Albert e		☐ DELETE	1.1 TITLE				☐ Chan	ge 🔲 Addition	
STREET ADDRES					1.2 NAME	T ADDRESS					
CITY-ST-ZIP		ID PARK KS 66214			1.4 CITY-						
TITLE	VD			☐ DELETE	2.1 1ITLE				☐ Chan	ge Addition	
NAME	GREENBANK, JOHN C			2.2 NA							
STREET ADDRES					2.3 STREE	I ADDRESS					
CITY-ST-ZIP		ID PARK KS 66214		DELETE	2. 4 Cily-	S1-ZIP					
TITLE NAME	PD Cinelli,	IOHN P		- DEGETE	3.1 TITLE				[] Chan	ge [_] Addition	
STREET ADDRES	نفحمهما				3.2 NAME	T ADDRESS					
CITY-ST-ZIP	3-	ID PARK KS 66214			3.4. CITY-						
TITLE	TVD			DELETE	4.1 TITLE			······································	☐ Chan	ge Addition	
NAME		r, thomas w			4. 2 NAME						
STREET ADDRES					4.3 STREE	ADDRESS					
CITY-ST-ZIP	OYERLAN	ID PARK KS 66214		la latina	4.4 CITY-	61-2IP					
TITLE	MAAAA	ALDEDT W. ID		DELETE	5.1 TITLE		St		∟ Chan	ge X Addition	
NAME STREET ADDRES		ALBERT W JR			- 5.2 NAME	~	Cole W. Hawks				
STREET ADDRES		ND 51. ID PARK K\$ 66214				ADDRESS	8829 Bond Str	eet			
TITLE	D	IV 17411 110 VUE 17		DELETE	5.4 CITY - 1 6.1 TITLE	01-58	Overland Park	KS	-66214 Chan	ne Addition	
NAME	LIETZKE,	GLORIA			62 NAME						
OTOCCT ADDRESS	. 0000 PO				0.0.01050						

14. I do 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 angual report or supplemental annual covort 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 supportation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

Thomas W. Shearer (913)492-1230

FILED

Jun 09 1997 8:00am

Secretary of State