

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000002423

1. Entity Name

AMERICAN INGREDIENTS COMPANY

Principal Place of Business

3947 BROADWAY
KANSAS CITY MO 64111

Mailing Address

3947 BROADWAY
KANSAS CITY MO 64111

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 44-0509866

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PAS ☐ Delete
NAME COSNER, JERRY L
STREET ADDRESS 9839 BRIAR
CITY-ST-ZIP OVERLAND PARK KS 66214

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS zipcode = 66207
CITY-ST-ZIP

TITLE V ☐ Delete
NAME SKOGERSON, LAWRENCE
STREET ADDRESS 9023 W 101 TERRACE
CITY-ST-ZIP OVERLAND PARK KS 66214

TITLE ☒ Change ☐ Addition
NAME 2801 W 67TH Terrace
STREET ADDRESS Mission Hills, KS
CITY-ST-ZIP Zipcode = 66208

TITLE V ☐ Delete
NAME MASA, ROGER W
STREET ADDRESS 6404 N.W. 70 STREET APT. 304
CITY-ST-ZIP KANSAS CITY MO

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS zipcode = 64151
CITY-ST-ZIP

TITLE V ☐ Delete
NAME KRICHIVER, JOEL
STREET ADDRESS 11507 KNOX
CITY-ST-ZIP OVERLAND PARK KS 66214

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS zipcode = 66210
CITY-ST-ZIP

TITLE S ☐ Delete
NAME COLIHAN, JAMES C
STREET ADDRESS 37 TELVA RD.
CITY-ST-ZIP WILTON CT

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS zipcode = 06897
CITY-ST-ZIP

TITLE CD ☐ Delete
NAME VINK, JAAP A.J.
STREET ADDRESS ARISTOTELES LAAN 3707 E1 ZEIST
CITY-ST-ZIP THE NETHERLANDS ;)

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-18-01

(816) 561-9050

CR2E034 (10/00)