

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

95 MAY -1 AM 8:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # F94000003534 (4)**

1. Corporation Name  
**INACOM CORP.**

Principal Place of Business  
**10810 FARNAM DR.  
OMAHA NE 68154**

Mailing Address  
**10810 FARNAM DR.  
OMAHA NE 68154**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified <b>07/06/1994</b>	3a. Date of Last Report
4. FEI Number <b>47-0681813</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 25
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	<b>FL</b>
83	
84 City	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when resigning) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCHWENDIMAN, GARY	1.2 NAME	Joseph Inatome
STREET ADDRESS	10810 FARNAM DR.	1.3 STREET ADDRESS	10810 Farnam Drive
CITY - ST - ZIP	OMAHA NE 68102	1.4 CITY - ST - ZIP	Omaha, NE 68154
TITLE	D	2.1 TITLE	Exec. V.P. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	INATOME, RICH	2.2 NAME	David Guenther
STREET ADDRESS	10810 FARNAM DR.	2.3 STREET ADDRESS	10810 Farnam Drive
CITY - ST - ZIP	OMAHA NE 68102	2.4 CITY - ST - ZIP	Omaha, NE 68154
TITLE	D	3.1 TITLE	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	AUERBACH, JOSEPH	3.2 NAME	Michael Steffan
STREET ADDRESS	10810 FARNAM DR.	3.3 STREET ADDRESS	10810 Farnam Drive
CITY - ST - ZIP	OMAHA NE 68102	3.4 CITY - ST - ZIP	Omaha, NE 68154
TITLE	D	4.1 TITLE	Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FAIRFIELD, BILL L	4.2 NAME	Gary Goldsberry
STREET ADDRESS	10810 FARNAM DR.	4.3 STREET ADDRESS	10810 Farnam Drive
CITY - ST - ZIP	OMAHA NE 68102	4.4 CITY - ST - ZIP	Omaha, NE 68154
TITLE	D	5.1 TITLE	Pres. - Direct Division <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GREGORY, W. GRANT	5.2 NAME	Robert Schultz
STREET ADDRESS	10810 FARNAM DR.	5.3 STREET ADDRESS	10810 Farnam Drive
CITY - ST - ZIP	OMAHA NE 68102	5.4 CITY - ST - ZIP	Omaha, NE 68154
TITLE	D	6.1 TITLE	Pres. - Communications Div. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VARNER, DURWARD B	6.2 NAME	George DeSola
STREET ADDRESS	10810 FARNAM DR.	6.3 STREET ADDRESS	10810 Farnam Drive
CITY - ST - ZIP	OMAHA NE 68102	6.4 CITY - ST - ZIP	Omaha, NE 68154

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 or the trustee 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 attached form with an address.

SIGNATURE: **David Guenther** Date: **4/26/95** (402)  
392-3900