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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600000841 (4)

LTCP CORPORATION

FILED

97 JUN 24 AM 10: 30

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place	of Business	Mailing Address		··	131 00 111 00111 00101 10111 01801 1101 1001
3030 GILLHAM ROAD 3030		3030 GILLHAM ROAD KANSAS CITY MO 64108-3119)		
				3. Date Incorporated or Qualified 02/20/1996	3a. Date of Last Report 12/3(1/95
	ace of Business GX11 hour RJ	2a. Mailing Address 26 3030 Gillh	sum Rd	4. F&I Number 43-1714102	Applied For Not Applicable
Suite, Apt.		Suite, Apt #, etc.	1504.1		60.75
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State 28 Kansas Cit	w MD	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7/p,	Country	8. This corporation has liability fo	
24 6411		29 6410 8 30	051		Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
C 1 CUMPURATION STSTEM					
	NTATION FL 33324		82 Street Address (P.O. Box Number is Not Acceptable)		
PLA	TIATION FE 35324		83		
			84 City	,,,	85 Zip Code
					FL
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 Lorida. 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		egistered Agent signature r		DAII
12.	OFFICERS AND	DIRECTORS DELETE	13. 1.170LE	ADDITIONS/CHANGES TO OFF	Change Addition 2
TITLE NAME	ECKARD, THOMAS E	_ been	1.2 NAME	Robert C. Crosby	
STREET ADDRESS	3030 GILLHAM ROAD		1,3 STREET ADDRESS	211 Lewisburg Ave.	
CITY-ST-ZIP	KANSAS CITY MO 64108		1.4 CHY-ST-ZIP	Franklin, TN 370	ာ ပ 4
TITLE	DS	DELFTE	2.1 1011.6	1	Change Addition
NAME	MATTHEWS, LESLIE A		2.2 NAME	000002	2201305
STREET ADDRESS	3030 GILLHAM ROAD		2.3 STREET ADDRESS	000002	79701114006
CITY-ST-ZIP	KANSAS CITY MO 64108		2. 4 C/TY - ST - 7/P	****5	58.75 ****558.75
TITLE	D	DELETE	3 1 1ITLE		L. Change L. Addition
NAME	APLIN, JOHN		3 2 NAME		
STREET ADDRESS	ONE AMERICAN SQ., STE. 2850	J	3 3 STREET ADDRESS		
CITY-ST-ZIP	INDIANAPOLIS IN 46204	DELETE	3.4. CHY-ST-ZIP 4.1 THLE		Change Addition
TITLE	O'LEARY, DENISE		4. 2 NAME		
NAME STREET ADDRESS	3000 SAND HILL ROAD, SUITE	100	4.3 STREET ADDRESS		
CITY-ST-ZIP	MENLO PARK CA 95042	100	4.4 CHY - ST - ZIP		
TITLE	MENEO TYMICOTORIE	DELETE	5.1 1ITLE	Board Member	Change Addition
NAME			5.2 NAMI	William C. Cosner.	<i>,</i>
STREET ADDRESS			5.3 STREET ADDRESS	2409 Batten Rd.	
CITY-\$1-ZIP			5.4 CITY - ST - 7IP	William C. Cosner 2409 Britten Rd. Brocksville, FLA 3.	4601
TITLE		☐ DELETE	6.1 1111.6	·	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP	over a did that the information supplied	with this lilier dose not qualify f	or the exemption st	ated in Section 119.07(3)(i). Florida Statu	tes. I further certify that the

ruo mereby cermy mactine information supplied with rins ming does not quality for the exemption stated in section (19.0/(3)0), i forea statutes. 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 logal 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.

10/21/97 (84)756545