

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

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Mar 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000003476 (6)

1. Corporation Name
SERENDIPITY LEASING CORPORATION

Principal Place of Business
4800 MADISON AVENUE, STE 1500
KANSAS CITY MO 64112

Mailing Address
4800 MADISON AVENUE, STE 1500
KANSAS CITY MO 64112



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/08/1996	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 52-1984661		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL 85 Zip Code	

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Y S LUNSFORD, LARRY	1.1 TITLE	PRESIDENT
NAME	4800 MADISON, SUITE 1500	1.2 NAME	ROBERT A. BERNSTEIN
STREET ADDRESS	KANSAS CITY MO	1.3 STREET ADDRESS	4600 Madison, Suite 1500
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Kansas City MO 64112
TITLE	AS HART, JANE E.	2.1 TITLE	VICE PRESIDENT
NAME	3500 ONE KANSAS CITY PLACE, 1200 MAIN	2.2 NAME	STEVEN A. BERNSTEIN
STREET ADDRESS	KANSAS CITY MO	2.3 STREET ADDRESS	4600 Madison, Suite 1500
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Kansas City MO 64112
TITLE	SD KOHN, HERBERT M	3.1 TITLE	
NAME	11331 PENNSYLVANIA	3.2 NAME	
STREET ADDRESS	KANSAS CITY MO	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: *Larry A. Lunsford* LARRY A. LUNSFORD,

3/13/98 816-531-8882

CP2E034 (10/97)