

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 17, 2003 8:00 am
Secretary of State

01-17-2003 90094 044 ***150.00

06/20/23 MB

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1. Entity Name
PETRUS REALTY CORPORATION

Principal Place of Business
8100 E. 22ND ST N., BLDG 500
WICHITA KS 67226

Mailing Address
8100 E. 22ND ST N., BLDG 500
WICHITA KS 67226



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 48-1192221

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

**9. Election Campaign Financing
Trust Fund Contribution.**

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CD	<input type="checkbox"/> Delete
NAME	RUHFUS, ROLF E	
STREET ADDRESS	8100 E. 22ND ST N., BLDG 500	
CITY-ST-ZIP	WICHITA KS 67226	
TITLE	S	<input type="checkbox"/> Delete
NAME	MORSE, JOHN R	
STREET ADDRESS	8100 E. 22ND ST N., BLDG 500	
CITY-ST-ZIP	WICHITA KS 67226	
TITLE	P	<input type="checkbox"/> Delete
NAME	MOSSBURG, ROBERT E	
STREET ADDRESS	8100 E. 22ND ST N., BLDG 500	
CITY-ST-ZIP	WICHITA KS 67226	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	BAKER, ROY R	
STREET ADDRESS	8100 E. 22ND ST N., BLDG 500	
CITY-ST-ZIP	WICHITA KS 67226	
TITLE	V	<input type="checkbox"/> Delete
NAME	ISAAC, ANTHONY B	
STREET ADDRESS	8100 E. 22ND ST N., BLDG 500	
CITY-ST-ZIP	WICHITA KS 67226	
TITLE	V	<input type="checkbox"/> Delete
NAME	MARVIN, DON R	
STREET ADDRESS	8100 E. 22ND ST N., BLDG 500	
CITY-ST-ZIP	WICHITA KS 67226	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Roy R. Baker* **REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROY R. BAKER *cp* 1/17/03 (316) 681-5107
Date Daytime Phone #

CR2E034 (10/02)