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

CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000002207 (5)

WRIGHT BUSINESSES, INC.

FILED Apr 14 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address					
611 BROADWAY		611 BROADWAY)		
PADUCAH KY 42001		PADUCAH KY 42001	PADUCAH KY 42001		BO 1103 1110175		
]					DO NOT WRITE	IN THIS SPAC	
}					3. Date Incorporated or Qualified		1
					04/25/1997		
<u> </u>	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		[26]			61-0927928		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$ [;]	B.75 Additional
22		27					Fee Required
City & State		<u></u>	City & State		6. Election Campaign Financing		55.00 May Be
23		28			Trust Fund Contribution		Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has pa		
24	25	29	30		Personal Property Tax due June		
	9. Name and Address of C	urrent Registered Agent	81	1	10. Name and Address of New Re	gistered Ager	ıt '
NRAI SERVICES , INC.				Name			j
526	E. PARK AVENUE		82 Street Addr		Address (P.O. Box Number is Not Acceptab	le)	
TAI	LAHASSEE FL 32301		55				
			∫B3				
			-	- 			1 7 . 6 .
			84	City		FL 85	Zip Code
11. Pursuant	to the provisions of Sections 60	7.0502 and 607.1508, Florida Stal	utes, the abov	e-named	corporation submits this statement for the p	urpose of char	nging 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 register	red arous and the if participle (N)	Olf Benistered Ac	ent simplifie	required when reinstating)	DATÉ	
12,		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		ECTORS IN 12
TITLE	C	DELETE	1.1 TITLE				Change Addition
NAME	OMPLLE ALDEDT F		1.2 NAME				
STREET ADDRESS	8829 BOND STREET			T ADDRESS			
CITY-ST-ZIP	OVERLAND PARK KS		1.4 C/TY-				
TITLE	D	DELETE	21 TITLE	91-14		110	Change Addition
NAME	CINELLI, JOHN P		2 2 NAME				
STREET ADDRESS	8829 BOND STREET		•	T ADDRESS			
	OVERLAND PARK KS						
CHY-ST-ZIP TITLE	PD	DELETE	2.4 CITY- 3.1 TITLE	S1-ZIr		77	Change Addition
, ,	WRIGHT, A D	□ bretit			1	<u>ы</u> ,	Norther Thursday
NAME	611 BROADWAY		3.2 NAME				
STREET ADDRESS	PADUCAH KY			T ADDRESS			ł
CITY-ST-ZIP	PS PS	DC LTT.	3.4. CITY	\$1 - 7 (P			Phonos 4 datata
TITLE		L DELETE	41 THEF	ļ	S	M	Change Addition
NAME	TURNER, SHAWN 611 BROADWAY		4. 2 NAME		}		1
STREET ADDRESS			4.3 STREE	ADDRESS	i		
CITY-ST-ZIP	PADUCAH KY		4.4 CITY -	ST-ZIP			
TITLE	 	DELETE	5.1 TITLE	i		`(Change 🔏 Addition
NAME	WEBER, LOHN		5.2 NAME				1
STREET ADDRESS	8829 BOND STREET		5 3 STREE	f address			
CITY-ST-ZIP	OVERLAND PARK KS		54 CITY	ST - ZIP			
TITLE		DELETE	6.1 TITLE				Change
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	ADDRESS	}		l
CITY-ST-ZIP			6.4 CITY-	\$1 - Z (P			1
	ertify that the information suppli	ied with this filing does not qualify			ed in Section 119.07(3)(i), Florida Statutes. I	further certify t	hat the information

officer or director of the corporation 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 all officer or director of the corporation or the receiver or trusted 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.

Lohn H. Weber