## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Mar 31, 2000 8:00 am Secretary of State DOCUMENT # F97000004267 DATA SYSTEMS INTERNATIONAL, INC. OF KANSAS 03-31-2000 90080 029 \*\*\*150.00 Principal Place of Business Mailing Address 7801 WEST 110TH ST., STE, 200 7801 WEST 110TH ST., STE. 200 OVERLAND PARK KS 66210 OVERLAND PARK KS 66210-2358 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 43-1172651 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RZESZUTKO, ROBERT A Street Address (P.O. Box Number is Not Acceptable) 211 RAPSCALLION CT. ORLANDO FL 32828 Zip Code FL 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 **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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. CCEO ☐ Addition Change TITLE ☐ Delete TITLE MCGRAW, MICHAEL J NAME NAME 7801 WEST 110TH ST., STE. 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **OVERLAND PARK KS 66210** CITY-ST-ZIP DP ☐ Addition ☐ Delete TITLE Change TITLE. SAATHOFF, KENNETH L NAME NAME 7801 WEST 110TH ST., STE. 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **OVERLAND PARK KS 66210** ☐ Addition TITLE De'ete TITLE ☐ Change STEPHENS, DANIEL L NAME NAME 7801 WEST 110TH ST., STE. 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **OVERLAND PARK KS 66210** CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 any 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 employers for execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the regeiven changed, or on an attacl ient with an addres powered SIGNATURE:

Davime Phone #