2001 Uniform Business Report (UBR)

FILED May 22, 2001 8:00 am Secretary of State DOCUMENT #F97000006909 1. Entity Name PSS Labor Leasing, Inc. 05-22-2001 90639 011 ***158.75 Principal Place of Business Mailing Address CO069590 2. Principal Place of Business 3. Mailing Address 3231 SE Sixth Street P.O. Box 1249 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 48-1194126 Not Applicable Topeka, KS <u>Topeka, KS</u> Country Country \$8.75 Additional 5. Certificate of Status Desired 66607-2207 66601-1249 USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Corporation Service Company Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street Tallahassee, FL 32301-2525 City 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible. FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5:00 May Be After MAY 1, 2001 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (11/00) Addition TITLE TITLE ☐ Delete NAME NAME PLEASE SEE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ATTACHED ☐ Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIE Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition ☐ Delete TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE

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

CITY-ST-ZIP

NAME STREET ADDRESS

STREET ADDRESS

SIGNATURE:

CITY-ST-7IP

Ronald A. Cooperman SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

785-233-5171

Daytime Phone #

Outtachment Doc#F971000006909

PSS LABOR LEASING, INC.

LIST OF OFFICERS

Ullrich E. Porzig

Keith D. Spirgel

William J. Rainey -

Ronald A. Cooperman

Kenneth A. Grady

Gary C. Madsen

Harold J. Herman, II

Mary M. Thomas

President

Vice President

Vice President

Treasurer

Secretary

Assistant Treasurer

Assistant Secretary

Assistant Secretary

DIRECTORS

Duane Cantrell

Ken C. Hicks

Ullrich E. Porzig

Business Address of all Officers and Directors

3231 S.E. Sixth Street Topeka, KS 66607-2207 PSS LABOR LEASING, INC. CDU95909

3231 SE SIXTH STREET P.O. BOX 1249 TOPEKA, KANSAS 66601-1249

CERTIFIED MAIL - Return Receipt Requested Mail #7099 3400 0015 0837 8219

April 23, 2001.

Florida Department of State Annual Report Filings Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam:

State Form/Purpose: Uniform Business Report (UBR)

Company:

PSS Labor Leasing, Inc.

Tax Year:

2001

Check Enclosed:

\$158.75

Comments:

Enclosed fee includes \$150.00 Filing fee and \$8.75

additional fee for Certificate of Status. Thank You.

Sincerely,

Tax Department

Enclosure