

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G93761

1. Entity Name

UNITED TELEPHONE COMMUNICATIONS SYSTEMS, INCORPO

**FILED**  
**Jul 26, 2000 8:00 am**  
**Secretary of State**

07-26-2000 90014 003 \*\*\*550.00

Principal Place of Business

2330 SHAWNEE MISSION PKWY  
WESTWOOD KS 66205  
US

Mailing Address

903 E 104TH STREET  
MS:MOKCMW0609  
KANSAS CITY MO 64131  
US

2. Principal Place of Business

3. Mailing Address

6500 Sprint Parkway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

HL-5ASTV

City & State

City & State

Overland Park, KS

Zip

Country

Zip

Country

66205-5777

USA

4. FEI Number

59-2409361

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNS, JERRY M.  
555 LAKE BORDER DR.  
APOPKA FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP  
NAME KELLEY, J D  
STREET ADDRESS 555 LAKE BORDER DR.  
CITY-ST-ZIP APOPKA FL 32703 ☒ Delete

TITLE D Director  
NAME Michael T. Hyde  
STREET ADDRESS 2330 Shawnee Mission Pkwy.  
CITY-ST-ZIP Westwood, KS 66205 ☒ Change ☐ Addition

TITLE DS  
NAME JOHNS, J M  
STREET ADDRESS 555 LAKE BORDER DR.  
CITY-ST-ZIP APOPKA FL 32703 ☒ Delete

TITLE D Director  
NAME Carolyn S. Love  
STREET ADDRESS 2330 Shawnee Mission Pkwy.  
CITY-ST-ZIP Westwood, KS 66205 ☒ Change ☐ Addition

TITLE AVP  
NAME BESHEARS, MARK V  
STREET ADDRESS 903 E 104TH STREET  
CITY-ST-ZIP KANSAS CITY MO 64131 ☒ Delete

TITLE P President  
NAME Don A. Jensen  
STREET ADDRESS 2330 Shawnee Mission Pkwy.  
CITY-ST-ZIP Westwood, KS 66205 ☒ Change ☐ Addition

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE AVP Asst. Vice President  
NAME Mark V. Beshears  
STREET ADDRESS 6500 Sprint Pkwy.  
CITY-ST-ZIP Overland Park, KS 66205 ☒ Change ☐ Addition

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S Secretary  
NAME Valerie S. Brown  
STREET ADDRESS 2330 Shawnee Mission Pkwy.  
CITY-ST-ZIP Westwood, KS 66205 ☒ Change ☐ Addition

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 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 attachment with an address, with all other like empowered.

SIGNATURE:

*Mark V. Beshears*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AVP

7/20/00

913-315-5820

Date

Daytime Phone #

CR2E034 (5/00)