2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # M44961 May 26, 2000 8:00 am 1. Entity Name **Secretary of State** The R. J. Forbes Group, Inc. 05-26-2000 90125 008 ***158.75 Mailing Address Principal Place of Business 4211 South 102nd Street Omaha, Nebraska 68127-1031 2. Principal Place of Business 3. Mailing Address 4211 South 102nd Street DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 11-3036499 Not Applicable Omaha, Nebraska Country \$8.75 Additional 5. Certificate of Status Desired 68127-1031 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent The Prentice-Hall Corporation System, Inc. 1201 Hays Street, Suite 105 Tallahassee, FL 32301 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOWIII FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. Addition TITLE TITLE Delete P PCDT NAME NAME Kraska, Kenneth E. Mark Gibson STREET ADDRESS STREET ADDRESS 7 Bryan Meadow Path 4211 South 102nd St., Omaha, NE 3 CITY-ST-7IP CITY-ST-ZIE Fort Salonga, NY 11768 Chaige 81 2 Audithro Delete TITLE TITLE NAME J. Peter Ricketts Kraska, Ronald E. STREET ADDRESS STREET ADDRESS 4211 South 102nd St., Omaha, NE 11 Harbor Oaks Drive CITY-ST-ZIP CITY-ST-ZIE Chairge 3 1 27 Addition 3 1 Kings Park, NY □ Delete TITLE NAME John R. MacDonald STREET ADDRESS STREET ADDRESS 4211 South 102nd St., Omaha, NE CITY-ST-ZIP CITY-ST-ZIF Change 127 Addition 31 ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change Addition TITLE ☐ Delete 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 13. I hereby certify that the information supplied with this filling 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 of 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 andress, with all other like empowered. or the corporation of the receiver or changed, or on an attachment with John R. MacDonald, CFO (402)331-2744 SIGNATURE: 🗠 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR