

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

FILED  
Feb 25 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P01665 (9)  
1. Corporation Name  
OMD CORPORATION

Principal Place of Business  
3705 MISSOURI BLVD.  
P.O. BOX 6760  
JEFFERSON CITY MO 65109  
US

Mailing Address  
3705 MISSOURI BLVD.  
P.O. BOX 6760  
JEFFERSON CITY MO 65109-5771  
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		04/18/1984	05/01/1996
22 City & State		27 City & State		4. FEI Number	Applied For
23 Zip		28 Zip		43-1321338	Not Applicable
24 Country		30 Country		5. Certificate of Status Desired	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	NAME	DELETE	1.1 TITLE	Change	Addition
COURTNEY, O. EDWIN			1.2 NAME		
RT. # BOX 21			1.3 STREET ADDRESS		
HENLEY MO			1.4 CITY - ST - ZIP		
D			2.1 TITLE	Change	Addition
ROOF, GERALD			2.2 NAME		
5515 OLD HIGHWAY 45			2.3 STREET ADDRESS		
PADUCAH KY			2.4 CITY - ST - ZIP		
D			3.1 TITLE	Change	Addition
PIERCE, PAUL R.			3.2 NAME		
2433 THOMAS DRIVE, #147			3.3 STREET ADDRESS		
PANAMA CITY FL			3.4 CITY - ST - ZIP		
VP			4.1 TITLE	Change	Addition
HIRSCHMAN, DAVID			4.2 NAME		
3605 MALL RIDGE DRIVE			4.3 STREET ADDRESS		
JEFFERSON CITY FL			4.4 CITY - ST - ZIP		
VP			5.1 TITLE	Change	Addition
DOERING, DENNIS			5.2 NAME		
2014 AUTUM LANE			5.3 STREET ADDRESS		
JEFFERSON CITY MO			5.4 CITY - ST - ZIP		
VP			6.1 TITLE	Change	Addition
SMITH, DONNA			6.2 NAME		
5317 SHERIDAN DRIVE			6.3 STREET ADDRESS		
JEFFERSON CITY MO			6.4 CITY - ST - ZIP		

14. I do 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 annual report 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: O. EDWIN COURTNEY 2-14-97 593-893-893.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)

OFFICERS/DIRECTORS

\* CHAIRMAN/DIRECTOR

PAUL PIERCE SOCIAL SECURITY #309-36-5896  
2433 THOMAS DRIVE, # 147 PANAMA CITY BEACH, FL 573-893-8930

\* PRESIDENT/DIRECTOR

DONNA MCANANY SOCIAL SECURITY #486-52-7948  
4910 SHARON DRIVE JEFFERSON CITY, MO 65109 314-893-8930 *add*

\* EX VP/TREASURER/DIRECTOR

O. EDWIN COURTNEY SOCIAL SECURITY #486-42-1568  
RT #1 BOX 21 HENLEY MO 65040 314-893-8930

\* SR VP/ASST SECRETARY/DIRECTOR

DARRELL LEVEN SOCIAL SECURITY #491-64-4134  
705 HARVEST DRIVE JEFFERSON CITY MO 65109 314-893-8930 *add*

VP, TECHNICAL SUPPORT

DAVID R. HIRSCHMAN  
3605 MALL RIDGE DRIVE JEFFERSON CITY, MO 65109 314-893-8930

VP, SOFTWARE DEVELOPMENT/ASST SECRETARY

DENNIS N. DOERING  
2014 AUTUMN LANE JEFFERSON CITY, MO 65101 314-893-8930

SECRETARY

JUDY HEISBERGER SOCIAL SECURITY #509-40-1305  
673 HIDDENWOOD COURT JEFFERSON CITY MO 65109 314-893-8930 *add*

\* DIRECTOR

GERALD ROOF SOCIAL SECURITY # 406-25-1944  
5515 OLD HIGHWAY 45  
PADUCAH KY 42003