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PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

CITY-ST-ZIP

7015 COLLEGE BLVD. STE. 400

OVERLAND PARK KS 66211



FLORIDA DEPARTMENT OF STATE.

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P11532

(9)

SPRINT PUBLISHING & ADVERTISING, INC.

| FILED |
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| May 15 1997 8:00am |
| Secretary of State |
| |

4/30/97 /9/2 491-7000

| Principal Plac | o of Pusiness | | ailing Addross | | | | | | |
|---|---|-------------------------------|---------------------|---------------------|----------------------|----------------------|---|-----------------|----------------------------------|
| Principal Place of Business 7015 COLLEGE BLVD8TE.400 | | Mailing Address P.O. BOX 7974 | | | | | | | |
| OVERLAND PAI | RK K\$ 66211 | SH | AWNEE MISSION KS (| 6207-0974 | | | | | |
| | | | | | | | 3. Date Incorporated or Qualific | od 3a. [| Pate of Last Report |
| | | | | | | | 09/23/1986 | 05 | 06/1996 |
| 2. Principal Place of Business | | | 2a, Mailing Address | | | 4. FEI Number | | Applied For | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 48-1018228 | | Not Applicable \$8.75 Additional |
| 22 | | | 27 | | | | 5. Certificate of Status Desired | | Fee Required |
| City & State | | | City & State | | | | 6. Election Campaign Financing | | \$5.00 May Be |
| 23 | | | 8 | | | | Trust Fund Contribution | | Added to Fees |
| Zip | Country | | Zip | F-71 | | | 8. This corporation has liability | | |
| 24 | 25 9. Name and Address of Currer | | 9 30 | | | | Florida Statutes Yes No 10. Name and Address of New Registered Agent | | |
| OT 6 | CORPORATION SYSTEM | iit iiogis | Acros Agent | | 81 | Name | TO, Marile dila Address of New | negistored | Agont |
| • | | 1 | | | | | | | |
| 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 | | | | [| 82 | Street Addre | ess (P.O. Box Number is Not Accer |)table) | |
| | MIMION L GOOD | | | 1 | 83 | | | | |
| | | | | - | 84 | City | | | 85 Zip Code |
| | | | | | - [| , | | FL | _ [|
| 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 agont, 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 | Signature, typed or printed hanc of registered ag | il nectional de AM | Mr. Dogistand | Ann | et riouet es require | ed when reinstating) | DATE | | |
| 12, | OFFICERS AN | | | 13. | Age | in signata a regori | ADDITIONS/CHANGES TO OF | | D DIRECTORS IN 12 |
| TITLE | C | | DELETE | 1.1 1014 | Į F | | | | ☐ Change ☐ Addition |
| NAME | MILL, JAY M. | | 1.2 | | 1.2 NAME | | | | |
| STREET ADDRESS | 7015 COLLEGE BLVD S400 | | 18 | | 3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | OVERLAND PARK KS 66211 | | | | | 1 - ZIP | | | |
| TITLE | 8 | | ☐ ĎELETE 2.1 1 | | | | | | Change Addition |
| NAME | GRIMALDI, T A | | | 2.2 NAI | | | | | j |
| STREET ADDRESS | 7015 COLLEGE BLVD S400 | | | | | ADDRESS | | | |
| CITY-ST-ZIP | OVERLAND PARK KS 66211 | | DELETE | 2.4 CIT | | 31 - ZIP | | | Change Addition |
| TITLE | AHEGNE II | | | 3 1 1111 3 2 NAM | | | | | The Character Thankson |
| STREET ADDRESS | MIESKE, J.L. 7015 COLLEGE BLVD. | | | | | ADDRESS | | | |
| CITY-ST-ZIP | OVERLAND PARK KS 66211 | | | 3.3 gir | | | | | |
| TITLE | VP | | DELETE | 4.1 THE | | ' <u>''''-</u> | | | Change Addition |
| NAME | HUDLESTON, WARD | | | 4. 2 NA | ME | | | | - |
| STREET ADDRESS | 7015 COLLEGE BLVD S400 | | | 4.3 STF | REFT | ADDRESS | | | |
| CITY-ST-ZIP | OVERLAND PARK KS 66211 | | 4.4 CI1 | 4.4 Ci1Y- ST- 7iP | | | | | |
| TITLE | D DELETE | | 5 1 TITE | LF C | | Change Addition | | | |
| NAME | KURTZ, AL A | | | 5.2 NA | ΜŁ | | | | |
| STREET ADDRESS | 2330 SHAWNEE MISSION PK | WY | | 5.3 STF | REET | ADDRESS | | | |
| CITY-ST-ZIP | WESTWOOD KS 66205 | | | 5.4 CIT | | 1-21P | | | |
| TITLE | PD | | DELETE | 6.1 7171 | | | | | ☐ Change ☐ Addition |
| NAME | WALSH, R.J. | | | 6.2 NAI | ME | ł | | | |

63 STREET ADDRESS

14. Ido 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.

SICKEN IM. W CHILLE