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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P18355

(8)

KIRKE VAN-ORSDEL, INCORPORATED

Principal Place of Business

Mailing Address

26

1776 WEST LAKES PARKWAY WEST DES MOINES 10 50398

2. Principal Place of Business

Suite, Apt. #, etc.

1776 WEST LAKES PARKWAY WEST DES MOINES 10 50398

2a. Mailing Address

Suite, Apt. #, etc.

FILED Jan 26 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified

Applied For

\$8.75 Additional

Not Applicable

03/09/1988

4. FEI Number 42-1022852

22				27				Fee Required		
City & State			Ci	City & State				Election Campaign Financing \$5.00 May Be		
23			28	28				Trust Fund Contribution Added to Fees		
Zip	ip Country			Zip Cou			S. This corporation owes or has paid the current year Intangible			
24	4 25			29 30			Personal Property Tax due June 30. Yes No			
g. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent				
THE PRENTICE-HALL CORPORATION SYSTEM, INC.						81	Name			
1201 HAYS STREET						82	Stroot /	Address (P.O. Box Number is Not Acceptable)		
SUITE 105						Sueet Address (F.O. Box Number is Not Acceptable)				
TALLAHASSEE FL 32301					83					
TALLA MODEL 1 L 32001										
						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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE										
12.		OFFICERS AND	DIRECTO	RS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	C			DELETE	1.1	TITLE		Change Addition		
NAME	VAN OF	rsdel, William A.		1.21			,			
STREET ADDRESS				1		1.3 STREET ADDRESS				
CITY-ST-ZIP	DES MOINES IA					1.4 CITY-ST-ZIP				
TITLE	CEO			DELETE		2.1 TITLE		Change Addition		
NAME	KIRKE,	GARY			2.2	NAME				
STREET ADDRESS	s 1000 TU	JUP TREE LANE			2.3	STREET A	address (
CITY-ST-ZIP		DES MOINES IA			2. 4	CITY-S	T-ZIP			
TITLE	CFO	CFO CFO		DELETE	3.1 TITLE			Change Addition		
NAME	DANIEL	s, stephen d			3.2	NAME				
STREET ADDRES					3.3 S		ADDRESS	14032 Lakeview Dr.		
CITY-ST-ZIP		INGDALE IL -			3.4.	CITY-5	T-ZIP	Clive, IA 52325		
TITLE	SVP			DELETE	4.1	TITLE	1	☐ Change ☐ Addition		
NAME	KRAMBI	ECK, JAMES L			4. 2	NAME				
STREET ADDRESS	s 420 51	ST			4.3	STREET A	ADDRESS			
CITY-ST-ZIP	,	DINES IA			4.4	CITY-ST	- ZIP			
TITLE	P		_	DELETE	5.1	TITLE	1	☐ Change ☐ Addition		
NAME		EILER, KIRKE M			5.2	NAME				
STREET ADDRESS	s 1505 GI	LEN OAKS DRIVE			5.3	STREET A	ADDRESS			
CITY - ST - ZIP		DES MOINES IA			5.4	CITY-ST	- ZIP			
TITLE	SVT			DELETE	6.1	TITLE		☐ Change ☐ Addition		
NAME		er, patrick d			6.21	MAME				
STREET ADDRESS		INSTON			6.3	6.3 STREET A				
CITY-ST-ZIP		DALE IA 50322				CITY - ST				
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 or per attrichment with an address.										
SIGNATURE: SIGNATURE: 515-243-1776										
SIGNATURE: TRANSMINE THE DESCRIPTION OF THE DESCRIP										