

FILED
Jul 02, 2001 8:00 am
Secretary of State

07-02-2001 90003 040 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P21547

1. Entity Name

THOMAS K. DYER, INC.

Principal Place of Business Mailing Address

P.O. BOX 412197
KANSAS CITY, MO 64141

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-2347018

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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 President ☐ Delete
NAME Robert E. Sutton
STREET ADDRESS 9 Thayer St.
CITY - ST - ZIP Upton, MA 01568

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE Vice-President ☐ Delete
NAME Brian S. Doyle
STREET ADDRESS 6 Patch's Lane
CITY - ST - ZIP Wilmington, MA 01887

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE Secretary/Treasurer ☐ Delete
NAME Michael E. Schuering
STREET ADDRESS 1844 N. Waterfield Lane
CITY - ST - ZIP Blue Springs, MO 64014

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE Director ☐ Delete
NAME Edward McSpedon
STREET ADDRESS 7252 Elmsbury Lane
CITY - ST - ZIP West Hills, CA 91307

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE Director ☐ Delete
NAME John G. Finn
STREET ADDRESS 12 Quail Court
CITY - ST - ZIP Kinnelon, NJ 07405

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE Director ☐ Delete
NAME Charles L. O'Reilly, Jr.
STREET ADDRESS 75 Sheridan St.
CITY - ST - ZIP Woburn, MA 01801

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 807, 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: Michael E. Schuering Michael E. Schuering

4/19/01

(816) 472-1201

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #