2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P22595 May 15, 2000 8:00 am 1. Entity Name THE PACESETTER CORPORATION OF NEBRASKA Secretary of State 05-15-2000 90204 031 ***150.00 Mailing Address Principal Place of Business 4343 S. 96TH STREET 4343 S. 98TH STREET OMAHA NE 68127-1208 OMAHA NE 68127 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 47-0486836 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Zip Code FL 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 NOW!!! 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 11. OFFICERS AND DIRECTORS 12. ☐ Addition PD ☐ Delete TITLE Change TITLE SCHRAGER, HARLEY D. NAME STREET ADDRESS STREET ADDRESS 9709 FIELDCREST DRIVE CITY-ST-ZIP CITY-ST-7/P OMAHA NE Addition ☐ Delete TITLE Change TITLE KLUTHE, DONALD D NAME NAME STREET ADDRESS 16617 POPPLETON AVE. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP OMAHA NE Change Addition ☐ Delete TITLE TITLE EDELSTEIN, STANLEY M. NAME NAME STREET ADDRESS STREET ADDRESS 15315 SHIRLEY STREET CITY-ST-ZIP CITY-ST-ZIP OMAHA NE ☐ Change Addition ☐ Delete TITLE TITLE CAMPNEY, ROBERT G. NAME NAME STREET ADDRESS STREET ADDRESS 1412 N. 147TH PLAZA CITY-ST-ZIP CITY-ST-ZIP OMAHA NE Change Addition ☐ Delete TITLE SCHRAGER, PHILLIP G. NAME STREET ADDRESS STREET ADDRESS 3217 S. 101ST STREET CITY-ST-ZIP CITY-ST-7IP OMAHA NE ☐ Change ☐ Addition ☐ Delete **TITLE** TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Treasurer

4-25-2000

(402) 331-9400

CR2F034 (9/99)

Daytime Phone #