

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

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P27628 (7)
1. Corporation Name
CENTEL DIRECTORY COMPANY



DO NOT WRITE IN THIS SPACE

Principal Place of Business
7015 COLLEGE BLVD.
STE. 400
OVERLAND PARK KS 66631
US

Mailing Address
P.O. BOX 7974
SHAWNEE MISSION KS 66207-0974
US

3. Date Incorporated or Qualified
01/02/1990

4. FEI Number
36-3579194

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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALSH, ROBERT J.	1.2 NAME	
STREET ADDRESS	7015 COLLEGE BLVD., STE. 400	1.3 STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KEMPER, DONALD L.	2.2 NAME	
STREET ADDRESS	7015 COLLEGE BLVD. STE. 400	2.3 STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS 66211	2.4 CITY-ST-ZIP	
TITLE	VS	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DOERING, TAD	3.2 NAME	
STREET ADDRESS	7015 COLLEGE BLVD., STE. 400	3.3 STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIESKE, JOHN L.	4.2 NAME	
STREET ADDRESS	7015 COLLEGE BLVD., STE. 400	4.3 STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANYAN, BRUCE H	5.2 NAME	
STREET ADDRESS	2330 SHAWNEE MISSION PARKWAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	WESTWOOD KS 66205	5.4 CITY-ST-ZIP	
TITLE	CD	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KURTZ, A. A	6.2 NAME	
STREET ADDRESS	2330 SHAWNEE MISSION PARKWAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	WESTWOOD KS	6.4 CITY-ST-ZIP	

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***300.00

Jay m. mill
7015 College Blvd., Ste 400
Overland Park, KS 66211

14. 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 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 _____

CR2E034 (10/97)