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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 20, 1999 8:00 am  
Secretary of State

04-20-1999 90078 034 \*\*\*150.00

DOCUMENT # P27628

1. Corporation Name

CENTEL DIRECTORY COMPANY

Principal Place of Business

7015 COLLEGE BLVD.  
STE. 400  
OVERLAND PARK KS 66631  
US

Mailing Address

903 E 104TH STREET  
MOKCMWO609  
KANSAS CITY MO 64131  
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1990

4. FEI Number

36-3579194

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be  
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

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 DIRECTORS

TITLE PD ☐ DELETE

NAME WALSH, ROBERT J.  
STREET ADDRESS 7015 COLLEGE BLVD., STE. 400  
CITY-ST-ZIP OVERLAND PARK KS

TITLE VD ☐ DELETE

NAME KEMPER, DONALD L.  
STREET ADDRESS 7015 COLLEGE BLVD. STE. 400  
CITY-ST-ZIP OVERLAND PARK KS 66211

TITLE AS ☐ DELETE

NAME C.B. SLOAN  
STREET ADDRESS 7015 COLLEGE BLVD., STE. 400  
CITY-ST-ZIP OVERLAND PARK KS 33211

TITLE V ☐ DELETE

NAME MIESKE, JOHN L.  
STREET ADDRESS 7015 COLLEGE BLVD., STE. 400  
CITY-ST-ZIP OVERLAND PARK KS

TITLE D ☐ DELETE

NAME BRANYAN, BRUCE H  
STREET ADDRESS 2330 SHAWNER MISSION PARKWAY  
CITY-ST-ZIP WESTWOOD KS 66205

TITLE C ☐ DELETE

NAME JAY M MILL  
STREET ADDRESS 7015 COLLEGE BLVD., STE 400Y  
CITY-ST-ZIP OCLERLAND PARK KS 33211

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE: X

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/99

Date

(816) 854-7683

Daytime Phone #

CR2E034 (1/1/98)