

# FILE NCW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 MAY -1 PM 2:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P27756** (6)

1. Corporate Name

**SPRINT/UNITED MANAGEMENT COMPANY**

Principal Place of Business

**2330 SHAWNEE MISSION PARKWAY  
WESTWOOD KS 66205**

Mailing Address

**2330 SHAWNEE MISSION PARKWAY  
MAILSTOP: KSWESB0109  
WESTWOOD KS 66205  
US**

DO NOT WRITE IN THIS SPACE

|                                                                                                                                                              |                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| 3. Date incorporated or qualified<br><b>01/17/1990</b>                                                                                                       | 3a. Date of Last Report<br><b>02/11/1994</b> |
| 4. FFI Number<br><b>48-1077227</b>                                                                                                                           | Applied Fee<br>Not Applicable                |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                    | <b>\$8.75 Additional Fee Required</b>        |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                           | <b>\$5.00 May Be Added to Fees</b>           |
| 8. This corporation has liability for intangible tax under § 199.002<br>Florida Statutes <input type="checkbox"/> yes <input checked="" type="checkbox"/> no |                                              |

2. Principal Place of Business

2a. Mailing Address

21. State Apt # etc

26. State Apt # etc

22. City & State

27. City & State

23. Zip

28. Zip

24. Country

29. Country

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301**

|                                                           |  |
|-----------------------------------------------------------|--|
| 81. Name                                                  |  |
| 82. Street Address (P.O. Box Number is best & preferable) |  |
| 83. City                                                  |  |
| 84. State                                                 |  |
| 85. Zip Code                                              |  |

FL

11. Pursuant to the provisions of sections 603, 604, and 605, F.S., 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, thereby accepting the appointment of registered agent. I am a member with and accept the obligations of the named agent, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Officer or Director

Date

| 12. OFFICERS AND DIRECTORS |                                                                              | 13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1995 |                                                                   |
|----------------------------|------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------------------|
| NAME                       | PD<br>ESREY, WILLIAM T.<br>2330 SHAWNEE MISSION PWY<br>WESTWOOD KS 66205     | NAME                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | AVP<br>BESHEARS, MARK V.<br>13905 HAYES<br>OVERLAND PARK KS 33221            | NAME                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | AS<br>HYDE, MICHAEL T.<br>9839 ASH<br>OVERLAND PARK KS 66207                 | NAME                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | TV<br>M JEANNINE STRANDJORD<br>2330 SHAWNEE MISSION PWY<br>WESTWOOD KS 66205 | NAME                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | D<br>KRAUSE, ARTHUR B.<br>8611 REINHARDT LANE<br>LEAWOOD KS 66206            | NAME                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | D<br>DEVLIN, T. RICHARD<br>4104 W. 123RD ST.<br>LEAWOOD KS 66209             | NAME                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in section 199.002, Florida Statutes. I further certify that the corporation is filing this annual report of supplemental annual report or both and is a corporation and that my signature shall have the same legal effect as if made under oath. This filing is effective as of the date of filing of this report or the date of filing of this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 1 of the filing of this report or in an attached report with an address.

SIGNATURE: X

*Mark V. Beshears*  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR OFFICER  
Mark V. Beshears Asst. Vice President

4/27/95

913-624-2526