

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91438 025 ***150.00

DOCUMENT # P29637

1. Entity Name
LDR INTERNATIONAL INC.



Principal Place of Business
**9175 GUILFORD ROAD
COLUMBIA, MD 21046**

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



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

52-0894579

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **MCSPEDON, EDWARD**
STREET ADDRESS **7262 ELMSBURY LANE**
CITY-STATE-ZIP **WEST HILLS, CA 91307**

TITLE **D** ☒ Delete
NAME **WHISLER, BENJAMIN A**
STREET ADDRESS **19845 NE 125TH PLACE**
CITY-STATE-ZIP **WOODINVILLE, WA 98072**

TITLE **DV** ☐ Delete
NAME **MCDONALD, KEVIN R**
STREET ADDRESS **9526 DEBRA SPRADLIN COURT**
CITY-STATE-ZIP **BURKE, VA 22015**

TITLE **D** ☒ Delete
NAME **FUTTERMAN, EVAN C**
STREET ADDRESS **9106 LYON PARK COURT**
CITY-STATE-ZIP **BURKE, VA 22015**

TITLE **PD** ☒ Delete
NAME **DIMONDO, F. CHRISTOPHER**
STREET ADDRESS **616 W 58TH TERRACE**
CITY-STATE-ZIP **KANSAS CITY, MO 64113**

TITLE **ST** ☐ Delete
NAME **SCHUERING, MICHAEL E**
STREET ADDRESS **1844 N WATERFIELD LANE**
CITY-STATE-ZIP **BLUE SPRINGS, MO 64014**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Vice President** ☐ Change ☒ Addition
NAME **Piplow, Brian G.**
STREET ADDRESS **5137 Morningside Lane**
CITY-STATE-ZIP **Ellicott City, MD 21043**

TITLE **Vice President** ☐ Change ☒ Addition
NAME **Shrack, J. Kipp**
STREET ADDRESS **5237 Patriot Lane**
CITY-STATE-ZIP **Columbia, MD 21045**

TITLE **Vice President** ☐ Change ☒ Addition
NAME **Jarvis, Frederick D.**
STREET ADDRESS **10367 Buglenote Way**
CITY-STATE-ZIP **Columbia, MD 21044**

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

TITLE ☒ Change ☐ Addition
NAME **President**
NAME **Diamond, Christopher F.**
STREET ADDRESS **616 W. 58th Terrace**
CITY-STATE-ZIP **Kansas City, MO 64113**

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

12. 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Michael E. Schuering

Michael E. Schuering

4-21-03

(816) 472-1201

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)