

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33561

FILED  
Apr 21, 2004  
Secretary of State

Entity Name: TRIP MATE INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

9225 WARD PKWY  
2ND FLOOR  
KANSAS CITY, MO 64114 US

**New Principal Place of Business:**

**Current Mailing Address:**

9225 WARD PARKWAY  
2ND FLOOR  
KANSAS CITY, MO 64114 US

**New Mailing Address:**

FEI Number: 48-1062722      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS ST  
TALLAHASSEE, FL 32301

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FINKLE, BRADLEY G.,  
Address: 2804 WEST 177TH ST  
City-St-Zip: LEAWOOD, KS 66211

Title: AS ( ) Delete  
Name: FINKLE, LINDA M.,  
Address: 2804 WEST 117TH ST  
City-St-Zip: LEAWOOD, KS 66211

Title: CD ( ) Delete  
Name: CARP, MARILYN  
Address: 7019 PHEASANT CROSS DRIVE  
City-St-Zip: BALTIMORE, MD 21209

Title: SD ( ) Delete  
Name: LATCHFORD, PAUL C  
Address: 5 KAMPMAN COURT  
City-St-Zip: SPARKS GLENCOE, MD 21152

Title: T ( ) Delete  
Name: MCCONNELL, MARTHA ANN  
Address: 1214 OAK CROFT DRIVE  
City-St-Zip: LUTHERVILLE, MD 21093

Title: D (X) Delete  
Name: REKOSKI, DAVID G  
Address: 4070 CLOVERLEAND DRIVE  
City-St-Zip: PHOENIX, MD 21131

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: FINKLE, LINDA M.,  
Address: 2804 WEST 117TH ST  
City-St-Zip: LEAWOOD, KS 66211

Title: VP (X) Change ( ) Addition  
Name: BROWN, DOUGLAS  
Address: 11329 SLATER  
City-St-Zip: OVERLAND PARK, KS 66210

Title: VP (X) Change ( ) Addition  
Name: MCCAFFREY, DEBRA A  
Address: 12405 WEST 110TH PLACE  
City-St-Zip: LENEXA, KS 66215

Title: T (X) Change ( ) Addition  
Name: RAZAFSKY, JANET L  
Address: 11284 HEMLOCK  
City-St-Zip: OVERLAND PARK, KS 66210

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRADLEY G. FINKLE

PD

04/21/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date