

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P36112 (1)

1. Corporation Name

PRYOR RESOURCES, INC.

Principal Place of Business

2000 SHAWNEE MISSION PARKWAY
SHAWNEE MISSION KS 66205

Mailing Address

2000 SHAWNEE MISSION PARKWAY
SHAWNEE MISSION KS 66205



3. Date Incorporated or Qualified

10/30/1991

3a. Date of Last Report

02/07/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME LOVE, PHILIP R
STREET ADDRESS 2000 SHAWNEE MISSION PKW
CITY-ST-ZIP SHAWNEE MISSION KS

☐ DELETE

1.1 TITLE

☐ Change ☐ Addition

TITLE VD
NAME HAYS, MICHAEL B
STREET ADDRESS 2000 SHAWNEE MISSION PKW
CITY-ST-ZIP SHAWNEE MISSION KS

☐ DELETE

2.1 TITLE

☐ Change ☐ Addition

TITLE SD
NAME PRYOR, SHIRLEY
STREET ADDRESS 2000 SHAWNEE MISSION PKW
CITY-ST-ZIP SHAWNEE MISSION KS

☐ DELETE

3.1 TITLE

☐ Change ☐ Addition

TITLE D
NAME PRYOR, FRED H
STREET ADDRESS 2000 SHAWNEE MISSION PKW
CITY-ST-ZIP SHAWNEE MISSION, KS

☐ DELETE

4.1 TITLE

☐ Change ☐ Addition

TITLE D
NAME ANDERSON, DAN H
STREET ADDRESS 2209 WEST 125TH STREET
CITY-ST-ZIP LEAWOOD KS

☐ DELETE

5.1 TITLE

☐ Change ☐ Addition

TITLE AS
NAME SANFORD, THOMAS
STREET ADDRESS 2000 SHAWNEE MISSION PARKWAY
CITY-ST-ZIP SHAWNEE MISSION KS 66205

☐ DELETE

6.1 TITLE

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: ✓

Michael B. Hays EXC. V.P.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/1/96

Daytime Phone #

1437228503

CR2E034 (12/95)