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 # **P37924** **(8)**

1. Corporation Name

USA ADMINISTRATION SERVICES, INC.

Principal Place of Business	Mailing Address
12900 METCALF OVERLAND KS 66213-620 US	PO BOX 2948 OVERLAND PARK KS 66201-348 US

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified: **03/13/1992**
3a. Date of Last Report: **05/16/1995**
4. FEI Number: **48-0933220** ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 20000179816 2 -04/29/96--01033--006 ***208.75
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 _____ DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE ✓	1.1 TITLE ✓	P/D	☒ Change ☐ Addition
NAME	NEAL, LOUISE K.		1.2 NAME	Neal, Louise K.	
STREET ADDRESS	12346 CRAIG		1.3 STREET ADDRESS	12900 Metcalf	
CITY-ST-ZIP	OVERLAND PARK KS		1.4 CITY-ST-ZIP	Overland Park, KS	
TITLE	VP	☐ DELETE	2.1 TITLE	SVPD	☐ Change ☒ Addition
NAME	BREMSER, ROSE ANN		2.2 NAME	Donlon, J. Peter	
STREET ADDRESS	12900 METCLAF		2.3 STREET ADDRESS	12900 Metcalf	
CITY-ST-ZIP	OVERLAND PARK KS		2.4 CITY-ST-ZIP	Overland Park, KS	
TITLE	VPM	☒ DELETE ✓	3.1 TITLE	SVP/CFO/D	☐ Change ☒ Addition
NAME	MOSSBARGER, CAROLE C.		3.2 NAME	deMattos, Daniel	
STREET ADDRESS	12900 METCALF		3.3 STREET ADDRESS	12900 Metcalf	
CITY-ST-ZIP	OVERLAND PARK KS		3.4 CITY-ST-ZIP	Overland Park, KS	
TITLE	VPSB	☐ DELETE ✓	4.1 TITLE ✓	SVPD	☒ Change ☐ Addition
NAME	YAKIMO, PATRICIA A.		4.2 NAME	Yakimo, Patricia A.	
STREET ADDRESS	12900 METCALF		4.3 STREET ADDRESS	12900 Metcalf	
CITY-ST-ZIP	OVERLAND PARK KS		4.4 CITY-ST-ZIP	Overland Park, KS	
TITLE	CEB	☐ DELETE	5.1 TITLE ✓	AS	☐ Change ☒ Addition
NAME	SIMMS, WILLIAM		5.2 NAME	Hurst, William M.	
STREET ADDRESS	100 NORTH TYRON STREET SUITE 2600		5.3 STREET ADDRESS	1150 S. Olive Street	
CITY-ST-ZIP	CHARLOTTE NC		5.4 CITY-ST-ZIP	Los Angeles, CA	
TITLE	CEB	☐ DELETE ✓	6.1 TITLE ✓	D	☒ Change ☐ Addition
NAME	GOODING, DAVID E		6.2 NAME	Gooding, David E.	
STREET ADDRESS	1150 SOUTH OLIVE STREET		6.3 STREET ADDRESS	1150 S. Olive Street	
CITY-ST-ZIP	LOS ANGELES CA		6.4 CITY-ST-ZIP	Los Angeles, CA	

CR2E034 (12/95)

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)(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.

SIGNATURE: _____ Assistant Secretary 4/25/96 (213) 742-3128
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #