

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P38219

1. Entity Name

KANSAS CITY COMMUNITY CENTER INCORPORATED

Principal Place of Business

ATTN: EXEC DIR SUPPORT SVCS  
1514 CAMPBELL  
KANSAS CITY MO 64108

Mailing Address

ATTN: EXEC DIR SUPPORT SVCS  
1514 CAMPBELL  
KANSAS CITY MO 64108

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

CHERIGA, MIKE, ATTORNEY AT LAW  
101 EAST COLLEGE AVENUE  
TALLAHASSEE FL 32302

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE: STD ☐ Delete  
NAME: LOCASCIO, JOSEPH H JD  
STREET ADDRESS: 417 E. 13TH ST  
CITY-ST-ZIP: KANSAS CITY MO 64106

TITLE: T ☐ Delete  
NAME: PUGH, SHARON  
STREET ADDRESS: 3629 HARRISON BLVD.  
CITY-ST-ZIP: KANSAS CITY MO 64109

TITLE: BM ☐ Delete  
NAME: DUGGAN, EILEEN MD  
STREET ADDRESS: 12902 W. 76TH TERR  
CITY-ST-ZIP: KANSAS CITY MO 64114

TITLE: BM ☐ Delete  
NAME: PORTER, VERA  
STREET ADDRESS: 3030 BALITMORE  
CITY-ST-ZIP: KANSAS CITY MO 64112

TITLE: BM ☐ Delete  
NAME: LANG, DONALD P  
STREET ADDRESS: 16009 E. 29TH, APT. 3318  
CITY-ST-ZIP: INDEPENDENCE MO

TITLE: BM ☐ Delete  
NAME: EADS, JAMES  
STREET ADDRESS: 11921 EAST 55TH STREET  
CITY-ST-ZIP: KANSAS CITY MO 64133

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: Secretary ☐ Change ☒ Addition  
NAME: Miller, Iris  
STREET ADDRESS: 12309 E. 78th Street  
CITY-ST-ZIP: Kansas City, MO 64138

TITLE: BM ☐ Change ☒ Addition  
NAME: Jones, Erwin  
STREET ADDRESS: 3033 Chestnut, Apt. D  
CITY-ST-ZIP: Kansas City, MO 64128

TITLE: BM ☐ Change ☒ Addition  
NAME: Sheehan, Michael  
STREET ADDRESS: 12902 W. 76th Terr.  
CITY-ST-ZIP: Shawnee Mission, KS 66216

TITLE: P ☐ Change ☒ Addition  
NAME: Morgan, C. Eugene  
STREET ADDRESS: 1514 Campbell  
CITY-ST-ZIP: Kansas City, MO 64108

TITLE: ☐ Change ☐ Addition  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:   
STREET ADDRESS:   
CITY-ST-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 617, 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:

*C. Eugene Morgan*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(816) 421-6670

Date

Daytime Phone #

FILED  
Mar 05, 2001 8:00 am  
Secretary of State

03-05-2001 90316 044 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)