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 # **P38269** **(7)**

1. Corporation Name
ERAGP, INC.

Principal Place of Business
4900 COLLEGE BLVD.
OVERLAND PARK KS 66211

Mailing Address
4900 COLLEGE BLVD.
OVERLAND PARK KS 66211

3. Date Incorporated or Qualified: **04/10/1992**
3a. Date of Last Report: **05/01/1995**

4. FEI Number: **48-1113023** — Applied For / Not Applicable

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

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 SOUTH 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
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

TITLE	PD	☒ DELETE
NAME	GOULET, VICTOR N.	
STREET ADDRESS	4900 COLLEGE BLVD.	
CITY-ST-ZIP	OVERLAND PARK KS	
TITLE	V	☒ DELETE
NAME	SCHMITT, THOMAS E.	
STREET ADDRESS	6900 HOLIDAY ROAD	
CITY-ST-ZIP	BUFORD GA	
TITLE	V	☒ DELETE
NAME	PURCELL, ROBERT H.	
STREET ADDRESS	4900 COLLEGE BLVD.	
CITY-ST-ZIP	OVERLAND PARK KS	
TITLE	V	☒ DELETE
NAME	DIBERIEDETTE, ANTHONY R.	
STREET ADDRESS	4900 COLLEGE BLVD	
CITY-ST-ZIP	OVERLAND PARK KS	
TITLE	V	☐ DELETE
NAME	PETERSON, BRIAN K.	
STREET ADDRESS	4900 COLLEGE BLVD	
CITY-ST-ZIP	OVERLAND PARK KS	
TITLE	AS	☐ DELETE
NAME	BROWN, SUE	
STREET ADDRESS	4900 COLLEGE BLVD	
CITY-ST-ZIP	OVERLAND PARK KS	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P/D	☐ Change ☑ Addition
12 NAME	RICHARD L. SCHLOTT	
13 STREET ADDRESS	4900 COLLEGE BLVD	
14 CITY-ST-ZIP	OVERLAND PARK, KS 66211	
21 TITLE	V	☐ Change ☑ Addition
22 NAME	JOSEPH M. Florella	
23 STREET ADDRESS	4900 COLLEGE BLVD	
24 CITY-ST-ZIP	OVERLAND PARK, KS 66211	
31 TITLE	S	☐ Change ☑ Addition
32 NAME	Jen J. Augustine	
33 STREET ADDRESS	4900 College BLVD	
34 CITY-ST-ZIP	Overland PARK, KS 66211	
41 TITLE	100001831701	☐ Change ☐ Addition
42 NAME	-05/21/96--01041--027	
43 STREET ADDRESS	***200.00	
44 CITY-ST-ZIP		
51 TITLE	V/T	☑ Change ☐ Addition
52 NAME	BRIAN K. Peterson	
53 STREET ADDRESS	4900 College BLVD	
54 CITY-ST-ZIP	OVERLAND PARK, KS 66211	
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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: Sue Brown — Sue Brown — 4/25/96 — 913-491-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)