## 2004 FOR PROFIT CORPORATION

YANOWITCH, BEVERLY

BOCA RATON, FL 33432

BOCA RATON, FL 33432

BARRETT, STEPHEN.

925 S FEDERAL HWY SUITE 600

925 S FEDERAL HWY SUITE 600

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

## May 03, 2004 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P93000039270 05-03-2004 90780 039 \*\*\*150.00 IVY FUNDS DISTRIBUTOR, INC. Principal Place of Business Mailing Address 6300 LAMAR AVENUE 6300 LAMAR AVENUE 14018711 OVERLAND PARK, KS 66202 OVERLAND PARK, KS 66202 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04302004 ! Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0417837 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☑ Delete TITLE INENDY J KILLS WOLFE, PAULA K NAME NAME STREET ADDRESS 925 S FEDERAL HWY SUITE 600 STREET ADDRESS 6300 LAMAL SHAWNEE MISSION, KS 66200 CITY-ST-ZIP BOCA RATON, FL 33432 CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition BIVIN, THOMAS NAME NAME 925 S FEDERAL HWY SUITE 600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33432 CITY-ST-ZIP Delete CIDIP TITLE TITLE Change Addition CARLSON, KEITH J -NAME NAME. THOMAS W BUTCH 925 S FEDERAL HWY SUITE 600 6300 LAMAR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33432 CITY-ST-ZIP SHAWNEE MISSION, KS 66202 D/V TITLE 1 Delete TITLE Change -Addition TORRE, CLAUDINE NAME NAME JOHN E SUNDEEN JE 925 S FEDERAL HWY SUITE 600 STREET ANDRESS STREET ADDRESS 6300 LAMAR CITY-ST-ZIP BOCA RATON, FL 33432 CITY-ST-ZIP SHAWNEE MISSION, KS 66202 ☑ Delete TITLE ☐ Change Addition TITLE BRENT K BLOSS

**FILED** 

SHAWNEE MISSION, KS 66202 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 607, 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.

NAME

TITLE

NAME

Delete

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

6300 LAMRE

6300 LAMAR

MICHAEL D STROKM

SHAWNEE MISSION, KS 66202

☐ Change

Addition

(913) 236-1597 SIGNATURE: