## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

250 AUSTRALIAN AVE SUITE 400

2a. Mailing Address

WEST PALM BEACH FL 33401-5012

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

WEST PALM BEACH FL 33401

2. Principal Place of Business

SIGNATURE:

250 AUSTRALIAN AVE

SUITE 400



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000039210 (6)

MIG MANAGEMENT SERVICES OF MISSOURI, INC.

65-0600680 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country Z<sub>ip</sub> This corporation has liability for intangible tax under s. 199.032, 24 Florida Statutes X Yes No 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 KENDALL, ROBERT F aron Patric 250 AUSTRALIAN AVE. S. STE 400 tress (P.O. Box Number is Not Acceptable). 82 WEST PALM BEACH FL 33401 83 Zip Code 3340 City 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. Sharon (NOTE Reciel SIGNATURE title if applicable when reinstaling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) (96/6) 13. DELETE TITLE 1.1 TITLE ☐ Change Addition Addition Daniel L. Howers WAYMAN, EDWIN B 1.2 NAME NAME 2E034 aso Australian Ave 5 #400 250 AUSTRALIAN AVE STE 400 1.3 STREET ADDRESS STREET ADDRESS Nest Palm Beach, FL 33401 WEST PALM BEACH FL 33401 CHTY-ST-7IP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 21 TITLE WRIGHT, LARRY E NAME 2.2 NAME 250 AUSTRALIAN AVE STE 400 STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL 33401 CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE COTE, JAMES A N.S.M. 3.2 NAME 1990 N CALIFORNIA BLVD STE 640 STREET ADDRESS 3.9 STREET ADDRESS **WALNUT CREEK CA 94596** 3.4. CITY - ST-ZIP COLY - ST - ZIP DELETE Addition TILLE 4.1 TITLE VOGT, LOUIS E NAME 4. 2 NAME 250 AUSTRALIAN AVE. S. STE #400 STREET ADDRESS 4.3 STREET ADDRESS **WEST PALM BEACH FL 33401** City - St - ZiP 4.4 CITY - ST - ZIP VTS DELETE 5.1 TITLE ☐ Change Addition THLE GUTIN, KATHLEEN L 5.2 NAME NAME: 250 AUSTRALIAN AVE. S. STE #400 STREET ADDRESS 5.3 STREET ADDRESS WEST PALM BEACH FL 33401 City - S1 - ZIP 5.4 CITY - ST - ZIP Change DELETE Addition THILE 6.1 TELE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY - ST - ZIE I do 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 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 12 or Block 12 or on an attachment with an address.

FILED
May 02 1997 8:00am
Secretary of State

3a. Date of Last Report

Applied For

03/12/1996

3. Date incorporated or Qualified

05/17/1995

4. FEI Number