

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 06, 2001 8:00 am
Secretary of State

09-06-2001 90272 030 ***550.00

DOCUMENT # P99000107904

1. Entity Name

FLORIDA INFORMATION CONSORTIUM, INC.

Principal Place of Business

**C/O CT CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 PLANTATION FL 33324**

Mailing Address

**C/O CT CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 PLANTATION FL 33324**

2. Principal Place of Business

**10975 Benson St.
 Suite, Apt. #, etc.
 Ste 390**

3. Mailing Address

**10975 Benson St.
 Suite, Apt. #, etc.
 Ste 390**

City & State

Overland Park KS

City & State

Overland Park, KS

Zip

66210

Country

USA

Zip

66210

Country

USA

4. FEI Number

65-0967526

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 TALLAHASSEE FL 33324**

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$550.00
 After September 12, 2001 Fee will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME **D BRADLEY, WILLIAM F JR**
 STREET ADDRESS **150 W. MARKET ST., STE. 530**
 CITY-ST-ZIP **INDIANAPOLIS IN 46204**

TITLE ☐ Delete
 NAME **D DODD, JAMES**
 STREET ADDRESS **2208 W. 97TH ST.**
 CITY-ST-ZIP **LEAWOOD KS 66206**

TITLE ☒ Delete
 NAME **D SOMERHALDER, SAMUEL R**
 STREET ADDRESS **301 S. 13TH, STE. 301**
 CITY-ST-ZIP **LINCOLN NE 68508**

TITLE ☐ Delete
 NAME **D HERINGTON, HARRY H**
 STREET ADDRESS **10975 BENSON ST., STE. 390**
 CITY-ST-ZIP **OVERLAND PARK KS 66210**

TITLE ☒ Delete
 NAME **D CHILDRESS, KEVIN**
 STREET ADDRESS **10975 BENSON ST., STE. 300**
 CITY-ST-ZIP **OVERLAND PARK KS 66210**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME **Director/President/Secretary**
 STREET ADDRESS **William F. Bradley, Jr.**
 CITY-ST-ZIP **10975 Benson St, Ste 390**
Overland Park, KS 66210

TITLE ☐ Change ☒ Addition
 NAME **Director/Treasurer**
 STREET ADDRESS **Eric J. Bur**
 CITY-ST-ZIP **10975 Benson St, Ste 390**
Overland Park, KS 66210

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

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

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William F. Bradley, Jr.

William F. Bradley, Jr. 8-30-01

913-529-6001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)