

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30175

Entity Name: MIZE, HOUSER & COMPANY, PROFESSIONAL ASSOCIATION**Current Principal Place of Business:**534 S. KANSAS AVE.,
SUITE 700
TOPEKA, KS 66603**Current Mailing Address:**534 S. KANSAS AVE.,
SUITE 700
TOPEKA, KS 66603**FEI Number:** 48-0882363**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RACHLIN & COHEN, CPA'S
ATTN: RICHARD DRATH
1320 S DIXIE HWY,PENTHOUSE
CORAL GABLES, FL 33146 US*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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	BOND, DUANE E
Address	534 S. KANSAS AVE., SUITE 700
City-State-Zip:	TOPEKA KS 66603

Title	VP
Name	OWEN, BRADLEY
Address	534 S. KANSAS AVE., SUITE 700
City-State-Zip:	TOPEKA KS 66603

Title	VP
Name	HAUSCHILD, LINDA
Address	534 S. KANSAS AVE., SUITE 700
City-State-Zip:	TOPEKA KS 66603

Title	VP
Name	GOODGER, TIMOTHY
Address	534 S. KANSAS AVE., SUITE 700
City-State-Zip:	TOPEKA KS 66603

Title	PRESIDENT
Name	HILBERT, JAMES
Address	534 S. KANSAS AVE., SUITE 700
City-State-Zip:	TOPEKA KS 66603

Title	SECRETARY
Name	PHILLIPS, BRYAN
Address	534 S KANSAS AVE., SUITE 700
City-State-Zip:	TOPEKA KS 66603

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DUANE BOND

VP

03/11/2017

Electronic Signature of Signing Officer/Director Detail

Date