

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # 576321

1. Entity Name
BUTLER NATIONAL SERVICES, INC.



Principal Place of Business
2772 N.W. 31ST AVE.
FT. LAUDERDALE, FL 33311

Mailing Address
2772 N.W. 31ST AVE.
FT. LAUDERDALE, FL 33311



01302004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1829606	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FISCHRUPP, JON C.
2772 N.W. 31ST AVE.
FT. LAUDERDALE, FL 33311

**DO NOT WRITE
IN THIS SPACE**

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: Angela Seba Angela Seba CFO DATE: 04/09/04
Signature, typed; printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 X
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CDV STEWART, CLARK D 19920 W 161ST STREET OLATHE, KS 66062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FISCHRUPP, JON C 2772 N.W. 31ST AVE. FORT LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WAGONER, R. WARREN 19920 W 161ST STREET OLATHE, KS 66062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS FISCHRUPP, PEGGY E 2772 N.W. 31ST AVE. FORT LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO SEBA, ANGELA D 19920 W. 161ST STREET OLATHE, KS 66062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/12/04-80050-025 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Angela Seba Angela Seba CFO DATE: 04/09/04 (913) 780-9595