

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002732

FILED  
Feb 06, 2006  
Secretary of State

Entity Name: KCS CONSTRUCTION, INC.

**Current Principal Place of Business:**

8338 KENNEDY AVE  
HIGHLAND, IN 46322

**New Principal Place of Business:**

7029 WEST 25TH AVENUE (FRONT)  
GARY, IN 46406

**Current Mailing Address:**

PO BOX 9157  
HIGHLAND, IN 46322

**New Mailing Address:**

P.O. BOX 9157  
HIGHLAND, IN 46322

FEI Number: 35-1872291

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

BROWN, LEE  
9242 RIDGE PINE TRAIL  
ORLANDO, FL 32819 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MICKA, WAYNE  
Address: 1615 SANTA ANA COURT  
City-St-Zip: MUNSTER, IN 46321

Title: V ( ) Delete  
Name: HENLEY, STEPHEN  
Address: 19816 MONTEREY AVENUE  
City-St-Zip: LYNWOOD, IL 60411

Title: S ( ) Delete  
Name: MICKA, WAYNE  
Address: 8338 KENNEDY AVENUE  
City-St-Zip: HIGHLAND, IN 46322

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: MICKA, WAYNE  
Address: P.O. BOX 9157  
City-St-Zip: HIGHLAND, IN 46322

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WAYNE MICKA

P

02/06/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date