2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002331

Entity Name: ANDERSON ENGINEERING, INC.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2045 W WOODLAND SPRINGFIELD, MO 65807 **Current Mailing Address: New Mailing Address:** 2045 W WOODLAND SPRINGFIELD, MO 65807 FEI Number: 44-0581184 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PATD () Delete Title: CFO (X) Change () Addition BRADY, STEVEN L Name: Name: BRADY, STEVEN L 2045 S WOODLAND 2045 S WOODLAND Address: Address: City-St-Zip: SPRINGFIELD, MO 65807 City-St-Zip: SPRINGFIELD, MO 65807 Title: Title: VAST () Delete () Change () Addition Name: LAMBETH KEVIN V PRES Name: 501 EAST 15TH STREET Address: Address: **JOPLIN, MO 64804** City-St-Zip: City-St-Zip: Title: Title: VSD () Delete () Change () Addition HOGAN, JERROD V PRES Name: Name: 2045 W WOODLAND Address: Address: City-St-Zip: SPRINGFIELD, MO 65807 City-St-Zip: Title: DV () Delete Title: () Change () Addition DAVIS, LARRY Name: Name: Address: 2045 W WOODLAND Address: City-St-Zip: SPRINGFIELD, MO 658073 City-St-Zip: Title: Title: () Delete () Change () Addition TARNOWIECKYI, SIEGFRIED Name: Name: 501 EAST 15TH STREET Address: Address: City-St-Zip: JOPLIN, MO 64804 City-St-Zip: Title: () Delete Title: **PRES** (X) Change () Addition Name: BRADY, NEIL S Name: BRADY, NEIL S 5045 W WOODLAND 5045 W WOODLAND Address: Address: City-St-Zip: SPRINGFIELD, MO 65807 City-St-Zip: SPRINGFIELD, MO 65807

I hereby certify that the information supplied with this filing does not qualify 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: SHELIA M STANFIELD TREA 01/14/2009