

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003530

FILED
Feb 04, 2004
Secretary of State

Entity Name: BHA GROUP, INC.

Current Principal Place of Business:

8800 EAST 63RD ST.
KANSAS CITY, MO 64133

New Principal Place of Business:

Current Mailing Address:

8800 EAST 63RD ST.
KANSAS CITY, MO 64133

New Mailing Address:

FEI Number: 22-2968559 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD.
SUITE 508
MIAMI, FL 331560000 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: PD () Delete
Name: LUND, JAMES E
Address: 4108 W 123RD ST
City-St-Zip: LEAWOOD, KS 66209

Title: EVPD () Delete
Name: THOME, JAMES J
Address: 11400 W 149TH ST
City-St-Zip: OVERLAND PARK, KS 66221

Title: SVPS () Delete
Name: O'CONNOR, ROBERT B
Address: 8800 EAST 63RD STREET
City-St-Zip: KANSAS CITY, MO 64133

Title: SVFA () Delete
Name: SHAY, JAMES C
Address: 623 W 69TH TERR.
City-St-Zip: KANSAS CITY, MO 64113

Title: S () Delete
Name: BLAIR, SCOTT E
Address: 8800 E 63RD ST
City-St-Zip: KANSAS CITY, MO 64113

Title: CFOD () Delete
Name: SHAY, JAMES C
Address: 623 W 69TH TERR.
City-St-Zip: KANSAS CITY, MO 64113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES E LUND

PD

02/04/2004

Electronic Signature of Signing Officer or Director

_____ Date