

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004877

FILED  
Feb 07, 2008  
Secretary of State

Entity Name: FEDERATED RURAL ELECTRIC MANAGEMENT CORP.

**Current Principal Place of Business:**

11875 WEST 85TH STREET  
LENEXA, KS 66214

**New Principal Place of Business:**

**Current Mailing Address:**

11875 WEST 85TH STREET  
LENEXA, KS 66214

**New Mailing Address:**

FEI Number: 48-1219966

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: GERDES, ROD  
Address: P.O. BOX 230  
City-St-Zip: HORTON, KS 66439

Title: PCEO ( ) Delete  
Name: IRWIN, PHILIP D  
Address: 11875 W. 85TH STREET  
City-St-Zip: LENEXA, KS 66214

Title: V ( ) Delete  
Name: KLUG, KELLY J  
Address: 11875 W. 85TH STREET  
City-St-Zip: OLATHE, KS

Title: S ( ) Delete  
Name: OLANDER, SUSAN M  
Address: 11875 W. 85TH STREET  
City-St-Zip: LENEXA, KS 66214

Title: D ( ) Delete  
Name: MCCracken, DONALD L  
Address: 1485 OLIVER ROAD  
City-St-Zip: CENTERBURG, OH 43011

Title: D ( ) Delete  
Name: HOLMES, DIANA  
Address: 1594 S. DIVISION  
City-St-Zip: BLYTHEVILLE, AR 72316

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

Title: D (X) Change ( ) Addition  
Name: REED, STEVE  
Address: P.O. BOX 15147  
City-St-Zip: LENEXA, KS 66285 51

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN M. OLANDER

VPGC

02/07/2008

Electronic Signature of Signing Officer or Director

Date