

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Moynihan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 851447

(3)

1. Corporation Name

L.G. BARCUS AND SONS, INC.

Principal Place of Business

**1430 STATE AVENUE
KANSAS CITY KS 66102**

Mailing Address

**1430 STATE AVENUE
KANSAS CITY KS 66102**

APPROVED
AND
FILED

95 MAY -1 AM 8:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified **12/31/1981** 3a. Date of Last Report **04/20/1994**

4. FEI Number **48-0537757** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☐ No

2. Principal Place of Business

21. State, Apt. #, etc.

22. City & State

23. Zip

24. Country

2a. Mailing Address

26. State, Apt. #, etc.

27. City & State

28. Zip

29. Country

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations set forth in Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Current Registered Agent (If agent is not a corporation, sign as individual)

12. OFFICERS AND DIRECTORS

12.1 NAME

12.2 STREET ADDRESS

12.3 CITY, STATE, ZIP

**ST
STOCKFLETH, DALE E.
8527 ALDEN
LENEXA KS**

12.4 NAME

12.5 STREET ADDRESS

12.6 CITY, STATE, ZIP

**P
HOENER, RICHARD W.
11608 W. 100TH ST.
OVERLAND PARK KS**

12.7 NAME

12.8 STREET ADDRESS

12.9 CITY, STATE, ZIP

**C
BARCUS, LAWRENCE G.
1430 STATE AVE.
KANSAS CITY KS**

12.10 NAME

12.11 STREET ADDRESS

12.12 CITY, STATE, ZIP

12.13 NAME

12.14 STREET ADDRESS

12.15 CITY, STATE, ZIP

12.16 NAME

12.17 STREET ADDRESS

12.18 CITY, STATE, ZIP

12.19 NAME

12.20 STREET ADDRESS

12.21 CITY, STATE, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME

13.2 STREET ADDRESS

13.3 CITY, STATE, ZIP

13.4 NAME

13.5 STREET ADDRESS

13.6 CITY, STATE, ZIP

13.7 NAME

13.8 STREET ADDRESS

13.9 CITY, STATE, ZIP

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY, STATE, ZIP

13.13 NAME

13.14 STREET ADDRESS

13.15 CITY, STATE, ZIP

13.16 NAME

13.17 STREET ADDRESS

13.18 CITY, STATE, ZIP

13.19 NAME

13.20 STREET ADDRESS

13.21 CITY, STATE, ZIP

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY, STATE, ZIP

13.25 NAME

13.26 STREET ADDRESS

13.27 CITY, STATE, ZIP

13.28 NAME

13.29 STREET ADDRESS

13.30 CITY, STATE, ZIP

14. I, the undersigned, certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 139.027(1)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as a signature under oath. That I am an officer or director of the corporation or an officer or director empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 as changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/95

913-624-1150