

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90256 009 ***158.75

DOCUMENT # F94000005861

1. Corporation Name

CAPITAL ELECTRIC CONSTRUCTION COMPANY, INC.

Principal Place of Business

1320 OTTAWA
LEAVENWORTH KS 66048

Mailing Address

1320 OTTAWA
LEAVENWORTH KS 66048



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/14/1994

4. FEI Number

48-0721248

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH 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

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME DORAN, ROBERT E III
STREET ADDRESS 1320 OTTAWA
CITY-ST-ZIP LEAVENWORTH KS 66048 ☐ DELETE

TITLE VSTD
NAME BENNETT, STANLEY R
STREET ADDRESS 1320 OTTAWA
CITY-ST-ZIP LEAVENWORTH KS 66048 ☐ DELETE

TITLE VD
NAME WHITE, GORDON L
STREET ADDRESS 1428 W. 9TH STREET
CITY-ST-ZIP KANSAS CITY MO 64141 ☐ DELETE

TITLE V
NAME KINMAN, LOUIS G II
STREET ADDRESS 1428 W. 9TH STREET
CITY-ST-ZIP KANSAS CITY MO 64141 ☐ DELETE

TITLE V
NAME BLUMEL, JOHN L
STREET ADDRESS 1428 W. 9TH STREET
CITY-ST-ZIP KANSAS CITY MO 64141 ☐ DELETE

TITLE VP
NAME BACON, BYRON
STREET ADDRESS 1428 W 9TH ST
CITY-ST-ZIP KANSAS CITY MO 64141 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VICE-PRESIDENT ☐ Change ☒ Addition
1.2 NAME JAMES BERARD
1.3 STREET ADDRESS 1428 W. 9TH STREET
1.4 CITY-ST-ZIP KANSAS CITY, MO 64141

2.1 TITLE VICE-PRESIDENT ☐ Change ☒ Addition
2.2 NAME DONALD E. McCLANAHAN
2.3 STREET ADDRESS 1428 W. 9TH STREET
2.4 CITY-ST-ZIP KANSAS CITY, MO 64141

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STANLEY R. BENNETT

Date

Daytime Phone #

CR2E034 (11/98)