

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 810031

**FILED  
Mar 11, 2015  
Secretary of State  
CC3785332306**

**Entity Name:** MASSMAN CONSTRUCTION CO

**Current Principal Place of Business:**

8901 STATE LINE  
SUITE 240  
KANSAS CITY, MO 64114

**Current Mailing Address:**

PO BOX 8458  
KANSAS CITY, MO 64114

**FEI Number:** 44-0341360

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

*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

**Officer/Director Detail :**

Title PD  
Name MASSMAN, IV, H J  
Address 8901 STATE LINE  
City-State-Zip: KANSAS CITY MO 64114

Title VD  
Name SCHNOEBELEN, M H  
Address 12412 ROTT ROAD  
City-State-Zip: ST. LOUIS MO 63127

Title VDST  
Name KOPP, J T  
Address 8901 STATE LINE  
City-State-Zip: KANSAS CITY MO 64114

Title VPD  
Name PRADERIO, W G  
Address 8901 STATE LINE  
City-State-Zip: KANSAS CITY MO 64114

Title VP  
Name SCHARMER, P D  
Address 8901 STATE LINE RD  
City-State-Zip: KANSAS CITY MO 64114

*I hereby 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 all other like empowered.*

**SIGNATURE:** JOSEPH T KOPP

**TREASURER**

**03/11/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date