2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2024
Secretary of State
8049845271CC

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Entity Name: BOB D. CAMPBELL AND COMPANY, INC.

Current Principal Place of Business:

4338 BELLEVIEW AVE.
KANSAS CITY, MO 64111-3515

Current Mailing Address:

4338 BELLEVIEW AVE.
KANSAS CITY, MO 64111-3515 US

FEI Number: 43-0816544

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	SECRETARY
Name	SPENA, PAUL M.
Address	4338 BELLEVIEW AVE.
City-State-Zip:	KANSAS CITY MO 64111-3515

Title	VICE PRESIDENT
Name	DAVIS, WAYNE E.
Address	4338 BELLEVIEW AVE.
City-State-Zip:	KANSAS CITY MO 64111-3515

Title	DIRECTOR
Name	BOOS, CHRISTOPHER W.
Address	4338 BELLEVIEW AVE.
City-State-Zip:	KANSAS CITY MO 64111-3515

Title	PRESIDENT
Name	BEVERLIN, CHRISTOPHER A.
Address	4338 BELLEVIEW AVE.
City-State-Zip:	KANSAS CITY MO 64111-3515

Title	TREASURER
Name	SPENA, PAUL M.
Address	4338 BELLEVIEW AVE.
City-State-Zip:	KANSAS CITY MO 64111-3515

Title	DIRECTOR
Name	WRIGHT, JEFFREY L.
Address	4338 BELLEVIEW AVE.
City-State-Zip:	KANSAS CITY MO 64111-3515

Title	DIRECTOR
Name	FORD, BRANDON
Address	4338 BELLEVIEW AVE.
City-State-Zip:	KANSAS CITY MO 64111-3515

Title	VICE PRESIDENT
Name	BASINGER, CLARK A.
Address	4338 BELLEVIEW AVE.
City-State-Zip:	KANSAS CITY MO 64111-3515

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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: PAUL M. SPENA SECRETARY 04/09/2024

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	FALBE, MICHAEL J.
Address	4338 BELLEVIEW AVE.
City-State-Zip:	KANSAS CITY MO 64111-3515

Title	DIRECTOR
Name	CRABTREE, RICHARD C.
Address	4338 BELLEVIEW AVE.
City-State-Zip:	KANSAS CITY MO 64111-3515

Title	DIRECTOR
Name	BROOKS, STEVEN
Address	4338 BELLEVIEW AVE.
City-State-Zip:	KANSAS CITY MO 64111-3515

Title	DIRECTOR
Name	HAGEDORN, RYAN
Address	4338 BELLEVIEW AVE.
City-State-Zip:	KANSAS CITY MO 64111-3515