2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F01000000304

1. Entity Name
WATCO COMPANIES, INC.

Principal Place of Business

315 WEST 3RD PITTSBURG, KS 66762 Mailing Address

315 WEST 3RD PITTSBURG, KS 66762

FILED Jan 20, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01062004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

SIGLEY, WAYNE 1901 N. 1ST ST., #1706 JACKSONVILLE BEACH, FL 32250

DO NOT WRITE IN THIS SPACE

			IN THIS SPACE		
8. The above the obligat	e named entity submits this statement for the p tions of registered agent.	urpose of changing its registere	ed office or r	egistered agent, or bot	h, in the State of FTorida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable (NOTE Registore	Agent signatur	e required when relinstating)	DATE
FILE NOWI!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	ÖFFICERS AND DIREC	TORS	·		
NAME STREET ADDRESS CITY-ST-ZIP	PD WEBB, RICHARD B 25 TIMBERLAKE RD PITTSBURG, KS				U00000008517 01/20/04-80065-007 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LUNDY, GARY L 507 W CRESTVIEW AVE. PITTSBURG, KS 66762				· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY - ST - ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					· · · · · · · · · · · · · · · · · · ·
TITLE NAME					

12. 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 1 further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1-9-04

Paytime Phone