

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002913

Entity Name: KUSTOM SIGNALS, INC.

FILED
Mar 25, 2009
Secretary of State

Current Principal Place of Business:

9325 PFLUMM
LENEXA, KS 662153347

New Principal Place of Business:

Current Mailing Address:

10986 N WARSON RD
ST LOUIS, MO 63114

New Mailing Address:

FEI Number: 43-1757730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HIGHTOWER, RODNEY W
Address: 10986 NORTH WARSON RD
City-St-Zip: SAINT LOUIS, MO 63114

Title: STV () Delete
Name: STERRENBURG, JOHN P
Address: 10986 NORTH WARSON ROAD
City-St-Zip: ST. LOUIS, MO 631142029

Title: V () Delete
Name: KNIEPKAMP, KEITH
Address: 10986 NORTH WARSON ROAD
City-St-Zip: ST. LOUIS, MO 631142029

Title: D () Delete
Name: BROWN, ROY F
Address: 10986 NORTH WARSON ROAD
City-St-Zip: ST. LOUIS, MO 631142029

Title: V () Delete
Name: ABEL, CHRIS N
Address: 1010 W CHESTNUT
City-St-Zip: CHANUTE, KS 667200947

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: KULIKOWSKI, THOMAS J MR
Address: 9325 PFLUMM
City-St-Zip: LENEXA, KS 66215

Title: STVP (X) Change () Addition
Name: STERRENBURG, JOHN P
Address: 10986 NORTH WARSON ROAD
City-St-Zip: ST. LOUIS, MO 631142029

Title: SVP (X) Change () Addition
Name: KNIEPKAMP, KEITH
Address: 10986 NORTH WARSON ROAD
City-St-Zip: ST. LOUIS, MO 631142029

Title: DIR (X) Change () Addition
Name: BROWN, ROY F
Address: 10986 NORTH WARSON ROAD
City-St-Zip: ST. LOUIS, MO 631142029

Title: SVP (X) Change () Addition
Name: ABEL, CHRIS N
Address: 9325 PFLUMM
City-St-Zip: LENEXA, KS 66215

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN P STERRENBURG

STV

03/25/2009

Electronic Signature of Signing Officer or Director

_____ Date