

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 JUN 27 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F02000001445
1. Entity Name
Aquila Services, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
20 W. 9th Street
Suite, Apt. #, etc.

3. Mailing Address
20 W. 9th Street
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Kansas City, MO

City & State
Kansas City, MO

Zip
64105

Country
USA

Zip
64105

Country
USA

4. FEI Number
22-3366827

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

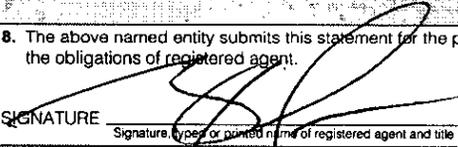
Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

City
Tallahassee

FL Zip Code
32301-2525

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  Brian Courtney
Asst. V. Pres.

(NOTE: Registered Agent signature required when reinstating)

DATE
6/27/03

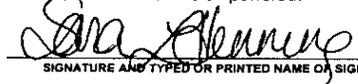
January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Please see attached
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**DO NOT WRITE
IN THIS SPACE**

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. I 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 on an attachment with an address with all other like empowered.

SIGNATURE:  Sara L. Henning Secretary 6-25-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

71 6/30

Directors, Officers Report

Aquila Services, Inc.

DIRECTORS

Michael G. Jonagan **Director**
Primary Address: 20 W. 9th Street
Kansas City, MO 64105

OFFICERS

Michael G. Jonagan **President**
Primary Address: 20 W. 9th Street
Kansas City, MO 64105

Leo C. Rajter **Vice President - Operations**
Primary Address: 20 W. 9th Street
Kansas City, MO 64105

Sara L. Henning **Secretary**
Primary Address: 20 W. 9th Street
Kansas City, MO 64105

Timothy M. Spear **Assistant Secretary**
Primary Address: 20 W. 9th Street
Kansas City, MO 64105

Brogan T. Sullivan **Assistant Secretary**
Primary Address: 20 W. 9th Street
Kansas City, MO 64105

Randal P. Miller **Treasurer**
Primary Address: 20 W. 9th Street
Kansas City, MO 64105

Joseph L. Gocke **Assistant Treasurer**
Primary Address: 20 W. 9th Street
Kansas City, MO 64105