

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90041 020 ***150.00

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1. Entity Name
HUXTABLE & ASSOCIATES, INC.



Principal Place of Business
**2151 HASKELL AVE., BLDG. 1
LAWRENCE, KS 66046**

Mailing Address
**2151 HASKELL AVE., BLDG. 1
LAWRENCE, KS 66046**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03152008 Chg-P CR2E034 (12/06)

4. FEI Number
48-0720830

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and state if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME BELCHER, BRUCE G.
STREET ADDRESS 1708 TROON LANE
CITY-ST-ZIP LAWRENCE, KS 66047

TITLE ST ☒ Delete
NAME COOK, FRED
STREET ADDRESS 5812 LONGVIEW ST.
CITY-ST-ZIP SHAWNEE, KS 66218

TITLE D ☐ Delete
NAME BELCHER, SMITTY G.
STREET ADDRESS 2000 PALMER CT
CITY-ST-ZIP LAWRENCE, KS 66047

TITLE D ☒ Delete
NAME BRANDON, CHARLES G.
STREET ADDRESS 13902 BOND
CITY-ST-ZIP OVERLAND PARK, KS 66221

TITLE D ☐ Delete
NAME GATHEN, JAMES R.
STREET ADDRESS 88 MARK ST.
CITY-ST-ZIP DESTIN, FL 32541

TITLE D ☐ Delete
NAME BELCHER, MICHAEL A.
STREET ADDRESS 716 NE LAKE POINT DR.
CITY-ST-ZIP LEE'S SUMMIT, MD 64064

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CEO** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CEO** ☒ Change ☐ Addition
NAME **GATHEN, JAMES R**
STREET ADDRESS **20 MISTY WATER LANE**
CITY-ST-ZIP **MARY ESTER, FL 32569**

TITLE **TREAS/SEC** ☒ Change ☐ Addition
NAME **BELCHER, MICHAEL A**
STREET ADDRESS **9640 LEE BLVD.**
CITY-ST-ZIP **LEAWOOD, KS 66206**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Gloria Keating

GLORIA KEATING

Date

(785)843-2910

Daytime Phone #