

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F92000000960 (6)**

1. Corporation Name

INFRASTRUCTURE DEVELOPMENT INCORPORATED



Principal Place of Business

**8400 WARD PARKWAY
KANSAS CITY MO 64114**

Mailing Address

**8400 WARD PARKWAY
KANSAS CITY MO 64114**

3. Date Incorporated or Qualified
12/07/1992

3a. Date of Last Report
04/05/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 **P.O. Box 8405**
Subj. Apt. #, etc

22 City & State

27 **Legal Dept., A2**

23

28 **Kansas City, MO**

24

Country

29

64114

30 **USA**

4. FEI Number
43-1622120

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**SMITH, D G
2701 NORTH ROCKY POINT, SUITE 960
TAMPA FL 33607-5924**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the legal name

Name of Registered Agent Signature required with no change

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**CD
PATTON, J L
8400 WARD PARKWAY
KANSAS CITY MO 64114**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**PD
HIPPS, J W
8400 WARD PARKWAY
KANSAS CITY MO**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**VD
SMITH, D G
2701 NORTH ROCKY POINT DRIVE, SUITE 960
TAMPA FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**V
HOWELL, L J
1500 MEADOW LAKE PARKWAY
KANSAS CITY MO 64114**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**S
SCHAPKER, F E
1500 MEADOW LAKE PARKWAY
KANSAS CITY MO 64114**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**T
HALL, W F
1500 MEADOW LAKE PARKWAY
KANSAS CITY MO 64114**

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

/J.W. Hipps

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 5, 1996

(913) 339-2000

CR2E034 (12/95)