

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F95000000012 (3)

1. Corporation Name

KEY CONSTRUCTION, INC.



Principal Place of Business

741 W. 2ND
WICHITA KS 67203

Mailing Address

741 W. 2ND
WICHITA KS 67203

3. Date Incorporated or Qualified
01/03/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number
48-1038581

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

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 of the president or principal registered agent and their appointment

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME WELLS, DAVID E
STREET ADDRESS 14804 TIMBERLAKE ROAD
CITY-ST-ZIP WICHITA KS 67203 ☐ DELETE

TITLE DCEO
NAME WELLS, KENNETH A
STREET ADDRESS 232 S. GLENDALE
CITY-ST-ZIP WICHITA KS 67218 ☐ DELETE

TITLE V
NAME MCCAFFERTY, RICHARD R
STREET ADDRESS 2830 PENSTEMON COURT
CITY-ST-ZIP WICHITA KS 67226 ☐ DELETE

TITLE V
NAME GOURLEY, LARRY K
STREET ADDRESS 2442 YELLOW STONE COURT
CITY-ST-ZIP WICHITA KS 67215 ☐ DELETE

TITLE ST
NAME PORTER, MARY E
STREET ADDRESS 561 W 1ST
CITY-ST-ZIP VALLEY CENTER KS 67147 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☒ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

CFO
LAWRENCE J WALTON
15 HAWTHORNE
VALLEY CENTER KS 67147

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mary E Porter Sec-Treas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-31-96

316-263-9515

CR2E034 (3/96)