

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005620

FILED
Apr 12, 2007
Secretary of State

Entity Name: DONDLINGER & SONS CONSTRUCTION CO., INC.

Current Principal Place of Business:

P.O. BOX 398
WICHITA, KS 672010398

New Principal Place of Business:

2656 S SHERIDAN
WICHITA, KS 67217

Current Mailing Address:

P.O. BOX 398
WICHITA, KS 672010398

New Mailing Address:

FEI Number: 48-0601790 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: PD () Delete
Name: DONDLINGER, THOMAS E
Address: 817 LINDEN CT
City-St-Zip: WICHITA, KS 67206

Title: VD (X) Delete
Name: DONDLINGER, PAUL J
Address: 13824 PINNACLE
City-St-Zip: WICHITA, KS 67230

Title: ST () Delete
Name: PHILLIPS, GREGORY D
Address: 1914 WHITE OAK
City-St-Zip: WICHITA, KS 67207

Title: VD () Delete
Name: DONDLINGER, JAMES N
Address: 8638 SW LOST LAKE RD
City-St-Zip: ANDOVER, KS 67002

Title: VD () Delete
Name: DONDLINGER JR, MARTIN C
Address: 1116 N DOREEN
City-St-Zip: WICHITA, KS 67206

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GREGORY D PHILLIPS

ST

04/12/2007

Electronic Signature of Signing Officer or Director

_____ Date