## **2007 FOR PROFIT CORPORATION**

## Secretary of State ANNUAL REPORT 05-15-2007 90005 016 \*\*\*550.00 DOCUMENT # F97000006879 W + D MACHINERY CO., INC. QUILU' Principal Place of Business Mailing Address 9101 OUIVIRA 9101 QUIVIRA OVERLAND PARK, KS 66215 OVERLAND PARK, KS 66215 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 05042007 CR2E034 (12/06) 4. FEI Number Applied For City & State City & State 48-0803501 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FL 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 14, 2007 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. C = 0Delete TITLE ☐ Change Addition TITLE Hischar, Mark COLLINS, ROBERT W NAME 9101 Quivira Road 9101 QUIVIRA RD. STREET ADDRESS STREET ADDRESS Overland Park KS 662159392 OVERLAND PARK, KS 662153392 CITY-ST-ZIP CITY-SI-ZIP TITLE DVS ☐ Delete TITLE OLSON, JANE NAME NAME STREET ADDRESS 9101 QUIVIRA RD. STREET ADDRESS CITY\_ST\_7/P CITY-ST-ZIP OVERLAND PARK, KS 662153392 DVT Delete TITLE Channe ☐ Addition TITLE OLSON, JANE NAME NAME 9101 QUIVIRA RD. STREET ADDRESS STREET ADDRESS OVERLAND PARK, KS 662153392 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition KUHN, DR. MANFRED NAME NAME STREET ADDRESS **SOHLER WEG 65** STREET ADDRESS CITY-ST-ZIP NUEWLED, GERMANY, D-5652 CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE KURZ, DIETMAR NAME NAME STREET ADDRESS SOHLER WEG 65 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEUWIED, GERMANY, D-5652 Delete TITLE □ Change Addition NAME

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.

CITY-ST-71P

STREET ADDRESS

SIGNATURE: \_

STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TH ED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/107

9<u>13 492 *9880*</u>

FILED

May 15, 2007 8:00 am