

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005 8:00 am
Secretary of State

03-28-2005 90077 025 ***150.00

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1. Entity Name
INNOVATIVE BUILDING TECHNOLOGY, INC.



Principal Place of Business
**1540 GENESSEE
KANSAS CITY, MO 64102 US**

Mailing Address
**C/O BUTLER MFG. CO.
PO BOX 419917
KANSAS CITY, MO 64141-6917 US**

50031326



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03102005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

43-1790997

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
RUTLEDGE, RONALD E
9204 NORTH BROOKLYN AVENUE
KANSAS CITY, MO 64155**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Lance Höckridge
5 Island Road
Port Kembla, NSW, 2505 Australia**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VDS
HUEY, JOHN W
1540 GENESSEE
KANSAS CITY, MO 64102**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D/P
Patrick Finan
The Millennium Center, North Tower
222 W. Las Colinas Blvd., Suite 1220
Irving, TX 75039**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
HOLLAND, JOHN J
1540 GENESSEE
KANSAS CITY, MO 64102**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
Adam Newman
1540 Genessee
Kansas City, MO 64102**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VT
MILLER, LARRY C
1540 GENESSEE
KANSAS CITY, MO 64102**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP/T
Nanka Schneider
1540 Genessee
Kansas City, MO 64102**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
Matthew Roth
1540 Genessee
Kansas City, MO 64102**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Assistant Secretary
Cecelia Baty
1540 Genessee
Kansas City, MO 64102**

☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Matthew Roth

Matthew Roth

3/18/05

816-968-3000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #