2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Mar 17, 2006 8:00 am Secretary of State DOCUMENT # F98000006450 03-17-2006 90123 046 ***150.00 1. Entity Name R. MESSNER CONSTRUCTION CO., INC. Mailing Address Principal Place of Business 2122 N. CYPRESS 2122 N. CYPRESS SUITE 500 SUITE 500 WICHITA, KS 67226 WICHITA, KS 67226 2. Principal Place of Business 3. Mailing Address 3122 N. CYPREGS 3122 N. CYPRESS Suite, Apt. #, etc. Suite 500 Suite, Apt. #, etc. CR2E034 (11/05) 03132006 Chg-P SUFTE 500 4. FEI Number Applied For City & State 48-1083993 Not Applicable WICHITA Country \$8.75 Additional Country 5. Certificate of Status Desired USA 6/226 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 B. 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 SIGNATURE. Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS ☐ Change Addition ☐ Delete TITLE TITLE MESSNER, RICHARD NAME RT #1, BOX 368 STREET ADDRESS STREET ADORESS ANDOVER, KS 67002 CITY-ST-ZIP CITY-ST-ZIP □ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-78P ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-7IP Defete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 fike empowered.

ATCHARD MESSNER, PRESIDENT 3/14/06

FILED