2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 02, 2007
Secretary of State

DOCUMENT# F99000005335

Entity Name: BIBB AND ASSOCIATES, INC.

Current Principal Place of Business:

8455 LENEXA DRIVE
LENEXA, KS 66214

New Principal Place of Business:

Current Mailing Address:

TAX & REGULATORY REPORTING
KIEWIT PLAZA
OMAHA, NE 68131

New Mailing Address:

FEI Number: 43-1834182 **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

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	PATTERSON, DOUGLAS E	
Address:	KIEWIT PLAZA	
City-St-Zip:	OMAHA, NE 68131	
Title:	P	( ) Delete
Name:	HENDRIX, LANCE D	
Address:	8455 LENEXA DRIVE	
City-St-Zip:	LENEXA, KS 66214	
Title:	VP/S	( ) Delete
Name:	ESTES, GLYNN R	
Address:	8455 LENEXA DRIVE	
City-St-Zip:	LENEXA, KS 66214	
Title:	VP	( ) Delete
Name:	BURNS, JOHN R	
Address:	8455 LENEXA DRIVE	
City-St-Zip:	LENEXA, KS 66214	
Title:	T	( ) Delete
Name:	BANGS, TAMMY L	
Address:	8455 LENEXA DRIVE	
City-St-Zip:	LENEXA, KS 66214	
Title:	VP	( ) Delete
Name:	ALDER, ROBERT C	
Address:	8455 LENEXA DRIVE	
City-St-Zip:	LENEXA, KS 66214	

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:	VP	(X) Change ( ) Addition
Name:	BALLAI, BRUCE W	
Address:	KIEWIT PLAZA	
City-St-Zip:	OMAHA, NE 68131	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	AS	(X) Change ( ) Addition
Name:	FRANCOVIGLIA, NICHOLAS C	
Address:	8455 LENEXA DRIVE	
City-St-Zip:	LENEXA, KS 66214	

I hereby certify that the information supplied with this filing does not qualify 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: BRUCE W. BALLAI VP 08/02/2007

Electronic Signature of Signing Officer or Director — Date