

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08654

FILED
Feb 01, 2008
Secretary of State

Entity Name: MARTIN K. EBY CONSTRUCTION CO., INC.

Current Principal Place of Business:

610 NORTH MAIN
WICHITA, KS 67203

New Principal Place of Business:

Current Mailing Address:

610 NORTH MAIN
P.O. BOX 1679
WICHITA, KS 67201

New Mailing Address:

FEI Number: 48-0521032 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: DP () Delete
Name: BEAN, RICHARD A
Address: 513 STONEBURY DRIVE
City-St-Zip: SOUTHLAKE, TX 76092

Title: DCOB () Delete
Name: GRIER, JAMES R. III,
Address: 202 LYNWOOD
City-St-Zip: WICHITA, KS 67218

Title: ST () Delete
Name: WALTON, LINDA D
Address: 12105 SW 30TH STREET
City-St-Zip: HALSTEAD, KS 67056

Title: V () Delete
Name: LEVENS, JOSEPH D JR
Address: 8406 MEADOW PASS
City-St-Zip: WICHITA, KS 67205

Title: VD () Delete
Name: EBY, CHARLES K.,
Address: 2212 BELLA VISTA
City-St-Zip: WICHITA, KS 67203

Title: V () Delete
Name: DUNN, RICHARD A
Address: 416 E. VALLEY PARK DRIVE
City-St-Zip: VALLEY CENTER, KS 67147

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:

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City-St-Zip:

Title: () Change () Addition
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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 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: LINDA D. WALTON

ST

02/01/2008

Electronic Signature of Signing Officer or Director

Date