2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2015
Secretary of State
CC2840391295

DOCUMENT# F01000001088

Entity Name: CAPITAL ELECTRIC CONSTRUCTION COMPANY, INC.

Current Principal Place of Business:

600 BROADWAY
SUITE 600
KANSAS CITY, MO 64105

Current Mailing Address:

P.O. BOX 5650
BISMARCK, ND 58506-5650 US

FEI Number: 91-2094074

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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

Officer/Director Detail :

Title	COBD
Name	THIEDE, JEFFREY S
Address	600 BROADWAY, SUITE 600
City-State-Zip:	KANSAS CITY MO 64105

Title	TREASURER
Name	HUNKE, JON B
Address	1150 WEST CENTURY AVENUE
City-State-Zip:	BISMARCK ND 58503

Title	VP
Name	STOWELL, DENNIS L
Address	600 BROADWAY, SUITE 600
City-State-Zip:	KANSAS CITY MO 64105

Title	VP
Name	NOSBUSCH, THOMAS D
Address	1250 WEST CENTURY AVENUE
City-State-Zip:	BISMARCK ND 58503

Title	P
Name	WELLS, MICHAEL A
Address	600 BROADWAY, SUITE 600
City-State-Zip:	KANSAS CITY MO 64105

Title	SVP
Name	MARTIN, MICHAEL J
Address	600 BROADWAY, SUITE 600
City-State-Zip:	KANSAS CITY MO 64105

Title	GCS, DIRECTOR
Name	SANDNESS, PAUL K
Address	1200 W. CENTURY AVE
City-State-Zip:	BISMARCK ND 58503

Title	ASST. SECRETARY
Name	HOURIGAN, KIRSTI B
Address	1200 WEST CENTURY AVENUE
City-State-Zip:	BISMARCK ND 58503

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I hereby 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 all other like empowered.

SIGNATURE: JON B HUNKE TREASURER 04/20/2015

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SCHWARTZ, DORAN N
Address	1200 WEST CENTURY AVENUE
City-State-Zip:	BISMARCK ND 58503