

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000002032

**Entity Name:** HAMWORTHY PEABODY COMBUSTION INC.

**Current Principal Place of Business:**

4111 E. 37TH ST. N.  
WICHITA, KS 67220

**FILED**  
**Mar 30, 2016**  
**Secretary of State**  
**CC4765350882**

**Current Mailing Address:**

4111 E. 37TH ST. N.  
WICHITA, KS 67220 US

**FEI Number: 13-1154870**

**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            PRESIDENT, DIRECTOR  
Name            SCHNELL, EARL W.  
Address        4111 E. 37TH ST. N.  
City-State-Zip: WICHITA KS 67220

Title            VP, DIRECTOR  
Name            BERRY, LAWRENCE P  
Address        4111 E. 37TH ST. N.  
City-State-Zip: WICHITA KS 67220

Title            SECRETARY  
Name            GIBSON, ROBERT J. JR.  
Address        4111 E. 37TH ST. N.  
City-State-Zip: WICHITA KS 67220

Title            TREASURER  
Name            HERNANDEZ, JEANNE R.  
Address        4111 E. 37TH ST. N.  
City-State-Zip: WICHITA KS 67220

Title            ASST. TREASURER  
Name            BULL, JOHN C.  
Address        4111 E. 37TH ST. N.  
City-State-Zip: WICHITA KS 67220

Title            DIRECTOR  
Name            GOODMAN, JIM  
Address        4111 E. 37TH ST. N.  
City-State-Zip: WICHITA KS 67220

Title            ASST. TREASURER, DIRECTOR  
Name            CHAMBERS, CASEY  
Address        4111 E. 37TH ST. N.  
City-State-Zip: WICHITA KS 67220

*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: JOHN C. BULL**

**ASSISTANT TREASURER    03/30/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date