

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004374

Entity Name: KCC CONTRACTOR, INC.

FILED  
Apr 18, 2007  
Secretary of State

**Current Principal Place of Business:**

1835 S. STEWART  
SPRINGFIELD, MO 65804

**New Principal Place of Business:**

**Current Mailing Address:**

1835 S. STEWART  
SPRINGFIELD, MO 65804

**New Mailing Address:**

FEI Number: 43-1687466

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KILLIAN, WILLIAM F  
Address: 1835 S. STEWART  
City-St-Zip: SPRINGFIELD, MO 65804

Title: S ( ) Delete  
Name: REINERT, JUNE A  
Address: 1835 S. STEWART  
City-St-Zip: SPRINGFIELD, MO 65804

Title: D ( ) Delete  
Name: PREWITT, DUANE  
Address: 1835 S. STEWART  
City-St-Zip: SPRINGFIELD, MO 35804

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM F KILLIAN

PD

04/18/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date