

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 11, 1999 8:00 am
Secretary of State

05-11-1999 90044 040 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F96000006223

1. Corporation Name
OVERLAND CONTRACTING INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 8400 WARD PKWY. KANSAS CITY MO 64114	Mailing Address P.O. BOX 8405 TAX DEPT. P6 KANSAS CITY MO 64114
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3. Date Incorporated or Qualified 11/27/1996
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2. Principal Place of Business 21 11401 LAMAR	2a. Mailing Address 26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State 23 OVERLAND PARK, KS	City & State 28
Zip 24 66211	Country 25 USA
Country 29	Country 30

4. FEI Number 48-1192113	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P MILLER, RC	1.2 NAME	
STREET ADDRESS	11401 LAMAR	1.3 STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS 66211	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S SLOAN, K S	2.2 NAME	Sloan, S.K.
STREET ADDRESS	11401 LAMAR	2.3 STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS	2.4 CITY-ST-ZIP	OVERLAND PARK, KS 66211
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	T GRIFFITHS, T L	3.2 NAME	
STREET ADDRESS	11401 LAMAR	3.3 STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS	3.4 CITY-ST-ZIP	OVERLAND PARK, KS 66211
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	V WOODWARD, KIRK	4.2 NAME	
STREET ADDRESS	11401 LAMAR	4.3 STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS	4.4 CITY-ST-ZIP	OVERLAND PARK, KS 66211
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AT HALL, WAYNE F	5.2 NAME	ATV
STREET ADDRESS	11401 LAMAR	5.3 STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS	5.4 CITY-ST-ZIP	OVERLAND PARK, KS 66211
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	V RODNEY I. UNRUH
STREET ADDRESS		6.3 STREET ADDRESS	11401 LAMAR
CITY-ST-ZIP		6.4 CITY-ST-ZIP	OVERLAND PARK, KS 66211

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wayne F. Hall REQUIRED WAYNE F. HALL 4-23-99 (713)458-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)

545522-90044-40
F96000006223

Name, Title, Business Address

Overland Contracting Inc.

DOCUMENT #: F96000006223

<u>Name</u>	<u>Title</u>	<u>Business Address</u>
Thomas Llewellyn Griffiths	Treasurer	11401 Lamar Overland Park, KS 66211
John Henry Haig	Vice President	10950 Grandview Overland Park, KS 66210
Wayne Frank Hall	Assistant Treasurer Vice President	11401 Lamar Overland Park, KS 66211
Garry Wayne Hart	Vice President	10950 Grandview Overland Park, KS 66210
George Christian Hedemann	Director Assistant Secretary Vice President	11401 Lamar Overland Park, KS 66211
Robert Christian Miller	President	11401 Lamar Overland Park, KS 66211
Steven Kent Sloan	Secretary Vice President	11401 Lamar Overland Park, KS 66211
Rodney Irl Unruh	Vice President	11401 Lamar Overland Park, KS 66211
Kirk Patrick Woodward	Vice President	11401 Lamar Overland Park, KS 66211