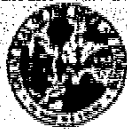


**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

**95 APR 12 PM 10:04**

**DOCUMENT # 854414 (0)**

1. Corporation Name  
**CSI COMPUTER SALES, INC.**

Principal Place of Business      Mailing Address  
**10845 OLIVE BLVD.  
STE. 300  
ST. LOUIS MO 63141  
US**      **10845 OLIVE BLVD.  
STE. 300  
ST. LOUIS MO 63141  
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **10/19/1982**      3a. Date of Last Report: **04/18/1994**  
4. FEI Number: **73-0982450**      Applied For:  Applied For,  Not Applicable  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing:  **\$5.00 May Be Added to Fees**  
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business      2a. Mailing Address  
21. Suite, Apt. #, etc.      26. Suite, Apt. #, etc.  
22. City & State      27. City & State  
23. Zip      28. Zip      29. Country      30. Country

9. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

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

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: \_\_\_\_\_ (Signature, typed or printed name of registered agent and title if applicable)      (NOTE: Registered Agent signature required when resigning.)      DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	CD
NAME	STEINBACK, KENNETH B
STREET ADDRESS	10589 FRONTENAC WOODS LN
CITY-ST-ZIP	ST. LOUIS MO
TITLE	PD
NAME	SMITH, ALBERT
STREET ADDRESS	#6 DUNLEITH
CITY-ST-ZIP	ST. LOUIS MO
TITLE	V
NAME	GILLULA, E. WILLIAM
STREET ADDRESS	327 N FORSYTH
CITY-ST-ZIP	CLAYTON MO
TITLE	SV
NAME	HAMILTON, STEPHEN G.
STREET ADDRESS	12021 CLAYTON RD.
CITY-ST-ZIP	ST. LOUIS MO
TITLE	V
NAME	LARSEN, LOREN D.
STREET ADDRESS	14930 GREENBERRY HILL CT
CITY-ST-ZIP	CHESTERFIELD MO
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	8801 N. 65th Street
2.4 CITY-ST-ZIP	PARADISE VALLEY AZ 85253
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	EXECUTIVE VICE PRESIDENT
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 checked, or in an attachment with an address.

SIGNATURE: **STEPHEN G. HAMILTON**      SR. VICE PRESIDENT & SECRETARY      4/5/95      314-997-7010