

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000004042

FILED
Apr 23, 2012
Secretary of State

Entity Name: CASSIDY TURLEY MIDWEST, INC.

Current Principal Place of Business:

7700 FORSYTH BLVD., STE. 900
CLAYTON, MO 63105

New Principal Place of Business:

Current Mailing Address:

7700 FORSYTH BLVD., STE. 900
CLAYTON, MO 63105

New Mailing Address:

FEI Number: 43-0955234

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: BURKHART, MARK
Address: 7700 FORSYTH BLVD., STE. 900
City-St-Zip: CLAYTON, MO 63105

Title: D
Name: BURKHART, MARK
Address: 7700 FORSYTH BLVD., STE. 900
City-St-Zip: CLAYTON, MO 63105

Title: SECD
Name: FLORENT, WILLIAM J
Address: 7700 FORSYTH BLVD., STE. 900
City-St-Zip: CLAYTON, MO 63105

Title: VP
Name: FALLON, JOE
Address: ONE INTERNATIONAL PLAZA
City-St-Zip: BOSTON, MA 02110

Title: VP
Name: BILLINGSLEY, ROBERT
Address: 40 E 52ND STREET, 11TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: VP
Name: RUFFNER, RON
Address: 4211 W. BOYSCOUT BLVD., STE. 500
City-St-Zip: TAMPA, FL 33607

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: WILLIAM J FLORENT

SEC

04/23/2012

Electronic Signature of Signing Officer or Director

Date