

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004289

Entity Name: TARLTON CORPORATION

FILED
Jan 23, 2007
Secretary of State

Current Principal Place of Business:

5500 W PARK AVE
ST LOUIS, MO 63110

New Principal Place of Business:

Current Mailing Address:

5500 W PARK AVE
ST LOUIS, MO 63110

New Mailing Address:

FEI Number: 43-0613116

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: VP () Delete
Name: MOORE, DAVID R
Address: 9426 FIREBUSH
City-St-Zip: ST LOUIS, MO 63126

Title: EVP () Delete
Name: ELSPERMAN, DIRK G
Address: 1645 FEATHERSTONE DR.
City-St-Zip: SAINT LOUIS, MO 63131

Title: P () Delete
Name: HART, TRACY E
Address: 56 HILL DR.
City-St-Zip: SAINT LOUIS, MO 63122

Title: SECR () Delete
Name: GUHR, WENDY E
Address: 11750 FAWN RIDGE
City-St-Zip: DES PERES, MO 63131

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:

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: DAVID R. MOORE

VP

01/23/2007

Electronic Signature of Signing Officer or Director

Date