

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 20, 2001 8:00 am**  
**Secretary of State**

06-20-2001 90007 034 \*\*\*550.00

0668220

**DOCUMENT # P18224**

1. Entity Name  
**MICHELSON REALTY COMPANY**

Principal Place of Business      Mailing Address

7701 FORSYTH BLVD.      7701 FORSYTH BLVD.  
 SUITE 900      SUITE 900  
 CLAYTON MO 63105-8813      CLAYTON MO 63105-8813

**A0074267**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

4. FEI Number **43-0716882**      Applied For  
 Not Applicable

Zip      Country      Zip      Country

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND ROAD**  
**PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

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

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	MICHELSON, BRUCE V.	
STREET ADDRESS	7701 FORSYTH BLVD.	
CITY-ST-ZIP	CLAYTON MO	
TITLE	VD	<input type="checkbox"/> Delete
NAME	LAZAROFF, ROBERT D.	
STREET ADDRESS	7701 FORSYTH BLVD.	
CITY-ST-ZIP	ST. LOUIS MO	
TITLE	V	<input type="checkbox"/> Delete
NAME	LAZAROFF, HAROLD	
STREET ADDRESS	7701 FORSYTH BLVD.	
CITY-ST-ZIP	ST. LOUIS MO	
TITLE	VSTD	<input type="checkbox"/> Delete
NAME	MICHELSON, BRUCE V JR	
STREET ADDRESS	7701 FORSYTH BLVD	
CITY-ST-ZIP	ST LOUIS MO	
TITLE	V	<input type="checkbox"/> Delete
NAME	CASEY, MICHAEL E.	
STREET ADDRESS	7701 FORSYTH BLVD.	
CITY-ST-ZIP	ST. LOUIS MO	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

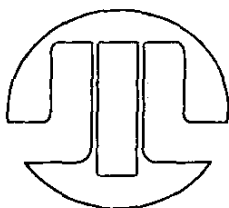
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael E Casey VP, Controller. (Michael E Casey)      6/20/01      314-862-2080  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (10/00)



**THE  
MICHELSON  
ORGANIZATION**

Pierre Laclède Center  
Suite 900  
7701 Forsyth Boulevard  
St. Louis, Missouri 63105-1813  
314/862-7080

Attachment  
DH P18224  
A000267

June 15, 2001

Division of Corporations  
Uniform Business Report Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

RE: Michelson Realty Company

Dear Sir or Madam:

Enclosed please find the Form P18224, Florida 2001 Uniform Business Report together with a check in the amount of \$550 for the balance due.

Sincerely,

Michael E. Casey  
Vice President, Controller

MEC: reb

Enclosure

cc: File